

Beliefs, Attitudes, and Knowledge About Homelessness: A Survey of the General Public¹

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Obtained measures of policy-related beliefs, attitudes, and knowledge about homelessness through a telephone survey of a representative sample of 240 persons conducted over nearly a full year in a medium-size northeastern metropolitan area. The study's data were compared to a national poll and to a local study documenting the actual characteristics of homeless persons. The results suggest that citizens are both supportive of and well informed about homelessness. For instance, 58% were willing to pay more taxes to help homeless persons and the mean estimate for the extent of mental illness among the homeless was within the range of estimates found in the local interview study. Few respondent background characteristics predicted belief, attitude, and knowledge variables. The main exceptions were gender and age. Women and younger respondents thought homelessness a more serious problem, saw fewer personal deficits among homeless persons, and perceived employment as more critical in the cause and solution of the problem.

Homelessness has gained national attention and is now perceived as a pressing social problem. The number of articles published on the topic in both popular and professional outlets has increased dramatically since 1980. A literature search that included five major newspapers and over 400 pe-

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riodicals found the number of articles on homelessness jumped from 32 in 1980 to 338 in 1984, to 809 in 1988. Increases have also been seen in the professional literature. A search of the literature indexed in *Psychological Abstracts* revealed 4 articles on homelessness in 1980, 20 in 1984, 46 in 1988, 175 in 1989, and 265 in 1990. A recent bibliography of books and articles from the past three decades on homelessness contains 488 entries, 285 published since 1985 (Shinn, Burke, & Bedford, 1990). There have been a number of recent popular and scholarly books and monographs on the topic (e.g., Institute of Medicine, 1988; Jones, Levine, & Rosenberg, 1991; Kozol, 1988; Lamb, 1984; Momeni, 1989, 1990; Rossi, 1989; Shinn & Weitzman, 1990; Wright, 1989). Printed media are not alone when it comes to an interest in homelessness. Other popular media have also jumped on the homelessness bandwagon, with movies (e.g., "Ironweed"), television programs (e.g., "Mad Housers"), hit songs (e.g., "Another Day In Paradise"), and fund-raisers (e.g., HBO's fourth annual Comic Relief telethon). The rate of publication and public interest in this area appears to remain high.³

The Stewart B. McKinney Homeless Assistance Act (Public Law 100-77) was signed into law in July 1987, and retains strong support (Foscarinis, 1991; Gore, 1990; Levine & Rog, 1990). It was reauthorized by the U.S. Congress in October 1988 and again in October 1990. The Bush administration unveiled its own national housing plan, Project HOPE, and this year an increased amount of funding in the federal Department of Housing and Urban Development is targeted to homelessness (Kondratas, 1991). These are all signs that housing and homelessness hold a central place in the attention of the nation at this time. Homelessness may be one of the few social problems for which public sentiment strongly favors policy change.

An awareness of the plight of homeless persons is important since the general public's support can be influential in dealing with homelessness. A clear temporal link has been found between public opinion and policy change (Burstein, 1985; Jason & Rose, 1984; Monroe, 1983; Page & Shapiro, 1982). However, in the case of homelessness, if policy makers and administrators are to respond to public opinion, the public's knowledge and attitudes must be made known. The object of this study is to document the public's attitudes and level of knowledge about homelessness through a telephone survey administered to a representative sample in a major metropolitan area.

³While the number of citations in the professional literature continues to rise, there are some indications that the numbers in the popular media may be leveling off or beginning a decline (Lee, Link, & Toro, 1991). Details on various searches of popular and professional literatures are available from the authors.

Many researchers and other professionals have assumed that the public is misinformed on the composition and life-style of America's homeless population. Terms such as "myths" (Snow, Baker, Anderson, & Martin, 1986; Wright, 1988) and "public speculation" (Fischer & Breakey, 1986) are common in the professional literature when the public's attitudes and knowledge are discussed. In particular, many professionals seem to believe that the public attributes homelessness primarily to mental illness and other personal deficits. Though generally supportive of homeless people, the popular media have also sometimes included negative portrayals. For example, in a recent *Time* magazine cover story reporting on homelessness and begging in America, several members of the general public expressed their beliefs that many, if not most, homeless people were "con artists" (Gibbs, 1988). The extent to which these and other journalistic accounts are representative of public attitudes is largely unknown.

There have been only a few studies and polls on the public's view of homelessness, all done in the past 7 years. The first obtained questionnaires in 1985 from a nonsystematic sample of 224 persons working in New York City, half living in the city, half in the suburbs (Benedict, Shaw, & Rivlin, 1988). Though demographically different, those living in the city and the suburbs both held sympathetic views of homeless persons. However, both groups were less supportive of having a shelter placed in their own neighborhoods. Younger respondents (under 40) and those in professional positions had the most sympathetic attitudes. Using a similar questionnaire in a second study, 314 persons attending New York City community board meetings in 1986 were surveyed (Benedict, Shaw, & Rivlin, in press). As in the previous study, those in this study were generally supportive of homeless persons. However, they were more likely to endorse the placement of a shelter in their own neighborhoods, especially if it were small.

Another study, conducted in the fall of 1987 in the Nashville metropolitan area, involved telephone interviews with 293 persons listed in the local directory (Lee, 1988; Lee, Jones, & Lewis, 1990). Strong support for homeless persons was also found in this study, with 59% feeling that government was not doing enough and 56% willing to increase taxes to fund services for homeless persons. Respondents were generally knowledgeable about the characteristics of homeless persons and attributed their homelessness to structural causes (e.g., "bad luck," uncontrollable economic and housing forces) more often than individual causes (e.g., personal choice, aversion to work, substance abuse). Lee and his colleagues noted that their findings concerning homelessness contrast with those from the large body of research showing that most Americans attribute the plight of the poor to their own personal failings (Feagin, 1975; Huber & Form, 1973; Kluegel & Smith, 1986; Nilson, 1981). There were several statistically significant

predictors of a general index tapping beliefs in structural (vs. individual) causes: Those with greater educational attainment and more liberal political orientations were more likely to attribute homelessness to structural causes (Lee, Jones, & Lewis, 1990). Younger respondents and those holding more liberal political views were more likely to feel that the government was not doing enough and to endorse tax increases to help homeless persons (Lee, 1988).

In addition to the three studies described above, a few opinion polls have included questions on homelessness. In November 1988, a Media General/Associated Press poll (MG/AP; Media General Research, 1989) asked 11 questions of a nationally representative sample of 1,084. The random digit dialing method used included persons with unlisted phone numbers. A slight majority of Americans both blamed homelessness on society rather than the homeless personally (58%) and was willing to pay more taxes to help homeless people (56%). Recent multivariate analyses on the MG/AP data found several predictors of attitudes about homelessness (Lee, Lewis, & Jones, 1990). Women, Democrats, those who identified their political orientation as liberal, younger persons, and those living in the Northeast (as opposed to the South) were more likely to blame society (vs. homeless persons) and/or to support government action to help homeless people.

In the context of a survey on expectations for the Bush Administration as it was taking office in January 1989, a *New York Times*/CBS News poll used similar random digit dialing methods to obtain a nationally representative sample of 1,533. This poll found that 65% of Americans supported increased funding to help homeless persons (Toner, 1989a, 1989b). About half of all respondents (49%) were willing to pay \$100 more in Federal taxes to help homeless people, a level of support nearly identical to that found for the antidrug effort (51%). Comparison to an earlier poll (Shipp, 1986) indicated the increasing visibility of homelessness: 51% reported personal contact with homeless persons in 1989 versus only 35% in 1986. Another poll was conducted in June 1989 by *New York Times*/WCBS-TV News (Barbanel, 1989) using items similar to those in the January 1989 poll. Among registered voters living in New York City, 59% indicated a willingness to pay \$100 more in taxes to help the homeless and a large majority (82%) reported personal contact with homeless people. The most recent poll was conducted in December 1990 in the Washington, DC area. Among 400 registered voters, 56% were willing to pay more taxes to help homeless people and 73% approved of locating overnight shelters in their areas ("Polls Show Majority," 1991).

The present study, in addition to providing a more recent replication of the surveys described above, provides several methodological improvements and adds to what is known about public views of homelessness in a

number of ways. First, in terms of methodology, the study involves a more extensive survey instrument that assesses a broader array of attitudinal domains. Those domains include a set of items assessing respondent knowledge about homeless people by inquiring about estimates of their characteristics, as well as two other domains tapping global policy-related beliefs and general attitudes on homelessness. Second, the survey instrument was carefully developed with extensive piloting and interviewer training, and attention to the instrument's psychometric properties (including the assessment of reliability and factor analysis to identify underlying attitudinal dimensions). Third, the study was designed to allow the comparison of policy-related beliefs to national data (the MG/AP poll). Fourth, individuals were sampled over nearly a full year to assess possible seasonal shifts in public opinion on homelessness and to provide a sample unbiased by seasonal factors. Finally, in terms of methodological improvements, like recent polls but unlike the three early studies, a random digit dialing method was used to obtain a more representative community sample.

In terms of new areas where knowledge could be gained, the study allowed the comparison of respondent knowledge about the characteristics of the homeless to a local study that documented those characteristics through interviews with a representative sample of homeless persons. The study also assessed an array of respondent background characteristics to identify those characteristics that predicted respondent beliefs, attitudes, and knowledge.

At the time this study was designed, expectations were that (a) as in the prior surveys (and as statistically compared to the national MG/AP poll results), respondents would show generally supportive policy-related beliefs and attitudes, including the tendency to endorse items suggesting structural versus individual causes for homelessness; (b) citizens would be generally knowledgeable about the characteristics of homeless people, though they might overestimate certain characteristics indicative of personal deficits (e.g., mental illness, substance abuse); and (c) those with a liberal political orientation, younger persons, professionals, and the more educated would show more supportive policy-related beliefs and attitudes and more positive estimates on the characteristics of the homeless population.

METHOD

Sampling

The sample consisted of 240 persons from Erie County, which surrounds Buffalo, NY. With a population of somewhat over 1 million (about

one third within the city limits), the county is representative of many medium-size metropolitan areas in the nation. The county has urban, suburban, and rural sections and a broad cross-section of ethnic groups, including large black, Hispanic, Italian, Irish, German, Polish, and Native American populations. In the process of attempting to shift its economic base from a focus on heavy industry, the area shares much in common with a number of other "rust-belt" cities in the northeast and midwest, all of which also have harsh winters. Recent yearly incidence estimates indicate a sizable homeless population county-wide (7,100–7,500; ARCA, 1988; Toro, 1990).

A variant of Waksberg's random-digit dialing method (Frey, 1989; Waksberg, 1978) was used to provide a random drawing of both listed and unlisted numbers and to yield urban and nonurban respondents proportional to their numbers in the county population. Once a household (as opposed to a commercial number) was reached, an adult was randomly chosen in a fashion outlined by Frey (1989) and used in the MG/AP poll. The interviewer asked to speak to the household member who was 18 or older and who had the most recent birthday. Respondents were anonymous and 50% of those contacted who were determined to be eligible agreed to the interview.

We expected to obtain a nearly representative sample of persons living in the county, since 96% of all households in the county have telephones. The obtained sample was 59% female (vs. 52% in the county as a whole) and 88% white (vs. 88% in the county). The mean age of the sample was 39.5 years (vs. 35.5 based on 1980 census data) and the mean income reported was \$23,158 (vs. \$22,547 based on 1985 census figures adjusted for inflation). Such small differences between the obtained sample and the general population are consistent with those obtained in other telephone surveys (e.g., Kluegel & Smith, 1986; Lee, Jones, & Lewis, 1990) and reflect the fact that the 4% of households without phones probably represented some of the poorest people in the county (including those who were homeless).

Interviews with respondents were conducted over nearly a full year (July 1989–April 1990) to assess possible seasonal shifts in public attitudes concerning homelessness. Of six MANOVAs done to assess such seasonal differences (see variable groupings used in the main analyses below), one yielded statistically significant ($p < .05$) results. The univariate ANOVAs and post hoc Newman-Keuls tests associated with this MANOVA indicated that persons surveyed in the Fall were more likely to see homelessness as a serious problem in nonurban areas of the county, $F(3, 171) = 3.82, p < .05$, Fall > Spring in post hoc tests, and were more supportive of allocating federal funding to help homeless persons, $F(3, 171) = 4.84, p < .01$, Fall > Winter in post hoc tests. Although these findings suggest that people surveyed at the start of the holiday period may be the most concerned

about and supportive of homeless persons, the samples across seasons were combined in all later analyses because the findings were neither numerous nor large in magnitude.

Survey Measure

Four items were taken from the MG/AP poll, the most extensive existing national survey. These four plus three other similar items assessing policy-related *beliefs* about homelessness constituted the first section of the survey. These initial items assessed global reactions to the problem of homelessness. A second *attitudes* section included 26 items assessing agreement with various general statements about the causes and solutions of homelessness and the life-styles of homeless persons. These 26 items differed from the prior belief items in assessing agreement with more specific aspects of homelessness and from all other items in the survey in that they were rated on the same 4-point scale. A third section of 25 items assessed the respondent's *knowledge* of the characteristics of homeless people (e.g., gender and racial composition, extent of mental illness and substance abuse) and allowed a comparison to the results of a recent survey of the homeless population in the county (Toro & Wall, 1991a). Most of these items required the respondent to provide a percentage estimate on the extent of the characteristic in question among the homeless population. Finally, there were 19 items assessing the respondent's demographic *background* (including actual exposure to homeless persons, socioeconomic factors, and political affiliation). These items allowed analyses to test whether respondent characteristics were related to beliefs, attitudes, and knowledge about homelessness. The final 77-item survey instrument was arrived at after extensive pilot testing and several revisions. It generally took 15–20 minutes to complete.

Reliability was assessed by having a different interviewer call back a subset of 34 respondents 3 to 14 days after the initial interview (20 of these respondents were from early in the survey and 14 were reinterviewed near the completion of data collection). This method provided a conservative estimate of reliability since it took into account both interviewer variability and discrepancies in recall by respondents. Reliability was determined by computing the percentage agreement between first and second interview responses while allowing for some variability. If the item was rated on a 2- or 3-point scale, the match had to be exact to be considered an "agreement"; if a 4-, 5- or 6-point scale, plus or minus 1 point; and if a percentage item (100-point scale), plus or minus 20 points. Based on these criteria 8 of the 77 items had a reliability of less than 80%: The belief that home-

lessness was getting worse, staying the same, or improving (63%); whether the respondent reported having personally done something to help homeless people (79%); and respondent knowledge about the percentages of homeless people who were currently married (75%), had never been married (72%), had children (73%), had a criminal record (65%), had drug problems (69%), and had not completed high school (77%). The results based on these items should, perhaps, be viewed more cautiously than those based on others.

To reduce the number of variables considered, a principal components analysis was conducted on 23 of the 26 attitude items (see Table III), all of which were rated on the same 4-point scale (three items lacking variability were dropped). The three factors with eigenvalues greater than 1.5, accounting for 37% of the total variance, were orthogonally rotated using the varimax procedure. Exact factor scoring was used. Respondents scoring high on the first factor, Isolation, tended to view homeless people as disconnected from family and friends. Those scoring high on the second factor, Employment, believed that employment factors were important as both causes and solutions of homelessness. Finally, those scoring high on the third factor, Deficits, viewed personal deficits (e.g., alcohol and drug abuse, mental illness, criminal behavior) as critical features of the homeless.⁴

RESULTS

Basic Descriptive Data and Comparison to the MG/AP National Poll

Most respondents saw homelessness as very or fairly serious (96% nationwide; 92% in urban areas; 59% in nonurban areas) and blamed society rather than homeless persons themselves for the problem (66%). A slight majority was willing to pay more taxes to help the homeless (58%) and thought the problem was getting worse (59%). Though only 12% personally knew one or more homeless person(s) and only 4% had experienced homelessness themselves, most (65%) reported having personally done something to help the homeless (usually by donating money, food, or clothing to charities or directly to homeless persons). Distributions for key policy related beliefs are provided in Tables I and II, those for attitude items in Table III, and those for knowledge items in Table IV.

⁴Further information on these factor analyses, the assessment of item reliability, random-digit dialing and call-back procedures and other methodological features of this study, as well as a copy of the survey instrument, are available from the authors.

Table I. Policy-Related Beliefs: Item Distributions and Comparison to the MG/AP National Poll^a

	Present study		MG/AP		χ^2	df
	n	%	n	%		
Fault for homelessness						
Society	124	65.6	488	57.7	3.87 ^c	1
The homeless themselves	65	34.4	358	42.3		
The problem of homelessness ^b						
Getting worse	120	58.5	737	71.6	16.61 ^d	2
Staying the same	70	34.1	260	25.2		
Improving	15	7.3	33	3.2		
Primary responsibility for homeless						
Federal government	121	57.6	347	38.6	25.60 ^d	3
State government	39	18.6	260	28.9		
Local government	35	16.7	195	21.7		
Charities	15	7.1	98	10.9		
Federal spending for the homeless ^b						
Increase, would pay more taxes	129	57.8	559	55.5	37.04 ^d	3
Increase, would <i>not</i> pay more taxes	47	21.1	81	9.0		
Funding should remain the same	34	15.2	293	29.1		
Funding should be decreased	13	5.8	65	6.4		

^aSample sizes vary from the maximum of 240 for the present study and 1,084 for the MG/AP poll because of missing data.

^bThese are two of the five continuous variables considered in later multivariate analyses on the predictors of policy-related beliefs.

^c $p < .05$.

^d $p < .01$.

Though statistically significant ($p < .05$) differences on all four common items were found between the large samples of the present survey ($N = 240$) and the MG/AP national poll ($N = 1,084$), most respondents in both studies blamed society and not homeless persons themselves for the current state of affairs and saw the situation getting worse (see Table I). Most respondents in both studies felt that federal or state government should be primarily responsible for helping the homeless (76% here, 67% in MG/AP) and, in both cases, a slight majority was willing to pay more taxes to help homeless persons (58% here, 56% in MG/AP).

Comparison to a Local Interview Study of Homeless Persons

The data from knowledge items, which asked respondents to estimate the percentages of homeless persons in various categories, were compared to rates obtained in a recent interview study of a representative sample of 76 homeless persons from the same metropolitan area (Toro & Wall,

Table II. Additional Item Distributions: Policy-Related Beliefs and Contact with Homeless People^a

	County, Urban ^b		County, Nonurban ^b		U.S. ^b	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Seriousness of homelessness by region						
Very serious	123	53.5	42	19.0	162	69.5
Fairly serious	89	38.7	88	39.8	62	26.6
Not too serious	17	7.4	75	33.9	8	3.4
Not at all serious	1	0.4	16	7.2	1	0.4
Contact with homeless people						
Daily					12	5.5
Weekly					16	7.3
Monthly					11	5.0
A few times per year					119	54.3
Never					61	27.9
Personally knows homeless person(s)					29	12.2
Has personally done something to help homeless ^c					155	65.1
Respondent has been homeless					10	4.2

^aSample sizes vary from the maximum of 240 because of missing data.

^bThese are three of the five continuous variables considered in later multivariate analyses on the predictors of policy-related beliefs.

^cMost frequently mentioned types of help (*n* in parentheses): Donated money to charity (57); donated food or clothing to charity (43); gave money directly to homeless person (34); and gave food, clothing, or shelter directly to homeless person (24).

1991a). Table IV presents the actual rates for various characteristics from the local study, the percentage of respondents in the present study who provided reasonably accurate estimates in comparison to each rate (± 20 percentage points), and the mean discrepancy between respondent estimates and the actual rate. Though statistically significant *t* values were obtained in this large sample when comparing 25 of the 27 mean discrepancy scores against an expected value of 0 (a 0 would indicate complete accuracy, on average, across participants), only 3 of the 27 mean discrepancy scores exceeded 20 percentage points (10 others exceeded 10 points). At least 50% of the respondents provided reasonably accurate estimates in 21 of the 27 instances (the mean discrepancy was also within 20 percentage points in all 21 of these cases).

Though most respondents accurately viewed men as a majority among the homeless, they also tended to underestimate the extent of this majority (by 17 points on average). Respondents overestimated the percentage of homeless people who were currently married (by 17 points) and underestimated the percentage never married (by 13 points). Based on a criterion in the local study of at least monthly contact being "regular," respondents

Table III. General Attitude Items: Distributions and Factor Loadings ($N = 240$)^a

Attitude	% Agree		% Disagree		Factor ^b
	A lot	A little	A little	A lot	
Causes of homelessness					
Unemployment	32	43	16	10	.73 E
Eviction/foreclosure	25	55	15	4	.50 E
Mental illness	19	35	29	17	.53 D
One's own choice	9	30	39	22	
Family conflict	18	58	21	4	.61 D
Drug and alcohol problems	18	57	20	5	.76 D
Solutions for homelessness					
Build low-cost housing	26	43	21	10	
Government job training	25	54	15	7	.59 E
Increased welfare spending	4	24	43	29	
Raise the minimum wage	11	30	42	17	-.53 I
Drug and alcohol treatment	17	48	25	10	-.51 D
More jobs	22	50	19	9	.67 E
Build more shelters	12	41	35	12	
Income sources of homeless					
Earned wages	12	32	33	23	
Illegal means	12	30	41	18	.57 D
Unemployment benefits	4	24	49	23	
Friends and relatives	4	36	45	15	-.68 I
Where homeless people sleep					
Outside (parks, etc.)	27	50	18	6	
In jail	19	58	16	7	.51 D
Shelters and missions ^c	23	67	7	3	
Abandoned buildings	20	64	15	2	
Friends'/relatives' home	7	33	43	17	-.70 I
Where the homeless spend days					
Friends'/relatives' home	7	17	50	26	-.74 I
Outside (parks, etc.) ^c	38	55	6	1	
Seeking employment	2	21	57	20	-.50 I
Miscellaneous					
Homeless often go hungry ^c	39	57	3	2	

^aItems were administered in a mixed order, not according to the logical groupings shown.

^bThe three factors with eigenvalues greater than 1.5 in a principal components analysis were rotated using the varimax procedure. Only item loadings of .50 or greater are indicated; I = isolation, E = employment, and D = deficits.

^cThese three items were dropped from the principal components analysis due to poor variability (90% or more indicated agreement).

grossly underestimated the extent of family contact among homeless people (by 34 points on average; only 24% of respondents provided an estimate within 20 points of the actual rate). Even based on a criterion in the local study of daily or weekly contact, respondents still underestimated the extent

of family contact somewhat (by 5 points on average; with 55% of respondents providing an estimate within 20 points of the actual rate).

Considering the four personal deficits respondents were asked to estimate, we see that the public generally *underestimates* when broader operationalizations of these deficits from the local interview study are used and *overestimates* when more stringent operationalizations are used. Thus, respondents grossly underestimated (by 24 points on average) the percentage of homeless persons with a criminal record, based on a criterion in the local study of having ever been arrested, and overestimated (by 13

Table IV. Knowledge Items: Accuracy of Public Perception Compared to Data from a Local Interview Study of Homeless Persons^a

% of homeless who:	Local rate		Discrepancy scores		
	(%)	% accurate	<i>M</i>	<i>SD</i>	<i>t</i>
Are male ^b	79	70	-17.4	16.1	-16.54 ^h
Have children ^b	49	57	-5.9	21.4	-4.28 ^h
Are currently married ^b	15	62	16.9	18.0	14.20 ^h
never married ^b	51	45	-12.9	21.5	-9.04 ^h
Have family contact ^b					
Monthly	64	24	-34.1	22.9	-22.36 ^h
Weekly	35	55	-5.1	22.9	-3.33 ^h
Are mentally ill ^c					
Psychiatric hospitalization	33	64	-0.5	21.5	-0.38
Lifetime diagnosis	15	63	17.5	21.5	12.36 ^h
Diagnosis past 6 months	14	61	18.5	21.5	13.07 ^h
Are alcoholic ^c					
Lifetime diagnosis	53	46	-9.1	22.8	-6.13 ^h
Diagnosis past 6 months	35	62	8.9	22.8	6.00 ^h
Are drug abusers ^c					
Lifetime diagnosis	37	60	3.2	22.3	2.15 ^g
Diagnosis past 6 months	14	45	26.2	22.3	17.76 ^h
Have criminal record ^c					
Arrest	62	34	-24.3	22.6	-16.29 ^h
Felony	25	64	12.7	22.6	8.53 ^h
Are 29 or younger ^d	47	52	-19.2	13.4	-21.96 ^h
30-44	33	89	-2.9	12.4	-3.57 ^h
45-64	17	81	9.6	13.2	11.18 ^h
65 or older	3	80	12.5	10.2	18.78 ^h
Are white ^d	33	89	-0.9	13.4	-1.04
Black	53	50	-18.4	10.6	-26.48 ^h
Hispanic/Native Am./other	14	53	19.4	13.5	21.75 ^h
Have completed some college	20	98	-3.5	11.2	-4.17 ^h
Completed high school ^e	25	86	7.2	12.9	8.43 ^h
Not completed high school ^e	55	74	-3.7	18.0	-3.45 ^h
Receive public assistance ^e					
Past year	45	48	-6.2	26.7	-3.37 ^h
Past month	30	57	8.8	26.7	5.06 ^h

Table IV. Continued

	Local		Public		χ^2	df
	n	%	n	%		
Monthly income of homeless ^e					5.81	3
Less than \$100	29	45	63	36		
\$100-199	11	17	47	27		
\$200-299	9	14	37	21		
\$300 or more	15	23	27	16		
Period of homelessness ^f					18.13 ^h	4
Less than 14 days	10	13	11	7		
15 days to 3 months	25	33	27	16		
More than 3 months to 1 year	22	29	66	39		
More than 1 year to 4 years	8	11	46	27		
More than 4 years	11	15	20	12		

^aAccuracy reflects the percentage of respondents whose estimates fell within 20 points (plus or minus) of the rate obtained for actual homeless persons in the local interview study. Observed discrepancy scores (survey participant's estimate minus actual rate from local study) were compared in *t* tests against the null hypothesis that the mean discrepancy = 0 (*dfs* = 224-238). Negative scores indicate that respondents underestimated the particular characteristic, positive scores indicate they overestimated.

^bVariables considered as a group (knowledge of basic demographics) in later multivariate analyses. Two operationalizations were available in the local study for "regular" family contact: at least monthly and at least weekly contact with at least one family member.

^cVariables considered as a group (knowledge of personal deficits) in later multivariate analyses. Three operationalizations were available in the local study for mental illness: a (lifetime) history of psychiatric hospitalization, a lifetime DSM-III diagnosis of severe mental illness (major affective disorder or schizophrenia), and a DSM-III diagnosis of severe mental illness with symptoms present in the past 6 months. Two operationalizations were available for alcoholism and drug abuse: a lifetime DSM-III diagnosis of (alcohol/drug) abuse or dependence, and such a diagnosis with symptoms present in the past 6 months. Two operationalizations were also available for criminal record: having ever been arrested and having ever been convicted of a felony.

^dVariables considered as a group (knowledge of age and race characteristics) in later multivariate analyses. To provide a more accurate criterion estimate, the local rates for race characteristics come from a more recent study (Toro, 1991) in the same county that sampled from a broader geographical area than the study providing all other rates in this table.

^eVariables considered as a group (knowledge of socioeconomic characteristics) in later multivariate analyses. Two operationalizations were available in the local study for receiving public assistance: in the past year and in the past month.

^fThis variable was not considered in later multivariate analyses due to a high proportion of missing values (70 of 240).

^g*p* < .01.

^h*p* < .05.

points on average) when the criterion was having committed a felony. Respondents underestimated (by 9 points) the extent of alcohol abuse among homeless persons when the criterion in the local study was having a lifetime DSM-III diagnosis of alcohol abuse/dependence (as derived from the structured Diagnostic Interview Schedule or DIS; see Eaton & Kessler, 1985;

Robins, Helzer, Croughan, & Ratcliff, 1981), but overestimated (also by 9 points) when symptoms were required to be present in the past 6 months. Most respondents were roughly accurate in their estimation of the extent of mental illness, based on the criterion most commonly used in research on homeless persons (i.e., lifetime experience of psychiatric hospitalization). However, when more rigorous operationalizations of mental illness are used (i.e., a DIS/DSM-III diagnosis of schizophrenia or major affective disorder), respondents tend to overestimate (by 18 points for lifetime prevalence and by 19 for 6-month prevalence). Respondents overestimated the extent of drug abuse among homeless persons, regardless of operationalization (by 26 points based on a criterion in the local study of having a DIS/DSM-III diagnosis of drug abuse/dependence, with symptoms present in the past 6 months, and by 3 points based on a criterion of lifetime prevalence).

The estimates of age characteristics showed that respondents tended to see homeless persons as older than they really were (respondents underestimated the percentage who were 29 or younger by 19 points and overestimated the percentage 65 years of age or older by 13). Respondents also underestimated the percentage of homeless persons who were black (by 18 points, on average) and overestimated the percentage of homeless persons who were Hispanic/Native American/other (by 19 points). As with the deficits above, respondents tended to underestimate the percentage of homeless persons on public assistance when a broad operationalization from the local interview study was used (anytime in past year), but to overestimate this percentage when a more stringent operationalization was used (funds received in past month).

The distributions of two knowledge items, assessed through a forced-choice format rather than the percentage estimation format of other knowledge items, were compared to the appropriate local study data by χ^2 tests. Though respondents were reasonably accurate in estimating the monthly income of homeless persons, they were somewhat inaccurate in estimating the typical length of homeless episodes (χ^2 was statistically significant, $p < .05$; see Table IV). Survey respondents perceived homeless episodes as lasting for longer than actual homeless persons from the local study experienced: They underestimated the number who had been homeless for 3 months or less and overestimated the number homeless for 3 months to 4 years.

Background Predictors of Beliefs, Attitudes, and Knowledge

Key belief, attitude, and knowledge variables were combined into six rational groupings for multivariate analyses: (a) five policy-related beliefs (see Tables I & II); (b) three attitude factor scores (Isolation, Employment,

and Deficits; see Table III); (c) five items reflecting knowledge of basic demographics; (d) four items reflecting knowledge of personal deficits; (e) five items reflecting knowledge of age and race characteristics; and (f) four items reflecting knowledge of socioeconomic characteristics (see Table IV). Predictor variables for this set of analyses were the respondents' own background characteristics, considered in the following hierarchical order: (a) gender; (b) age; (c) race; (d) religion; (e) education; (f) occupation-based SES; (g) income; (h) whether the respondent lived in an urban, suburban, or rural area of the county; (i) political orientation (liberal, moderate, or conservative); (j) party affiliation (Republican, Democrat, or independent/other); (k) whether the respondent voted in the last election; and (l) frequency of contact with homeless persons. This set of 12 predictor variables was considered in a multivariate multiple regression analysis for each

Table V. Significant Predictors of Beliefs, Attitudes, and Knowledge: Univariate Results for Respondent Gender^a

Dependent variable	Female		Male		F
	M	SD	M	SD	
Seriousness ^b					
Nonurban	2.98	0.80	2.47	0.89	17.38 ^h
Urban	3.61	0.60	3.38	0.68	5.72 ^g
U.S.	3.75	0.50	3.54	0.69	5.94 ^g
Problem getting worse ^b	1.60	0.57	1.38	0.68	6.11 ^g
Federal spending ^b	3.48	0.82	3.01	1.01	11.43 ^h
Factors ^c					
Employment	0.10	0.95	-0.15	1.05	4.16 ^g
Deficits	-0.12	1.09	0.17	0.84	4.98 ^g
% male ^d	59.95	17.72	65.07	13.80	5.29 ^g
% currently married ^d	34.60	19.02	27.83	16.79	7.42 ^g
% never married ^d	35.12	20.62	41.59	21.88	4.73 ^g
% with criminal record ^e	32.14	19.31	44.28	24.82	17.32 ^h
% not high school graduates ^f	48.31	17.73	55.24	17.23	6.96 ^h

^aResults presented above only when associated hierarchical univariate and multivariate tests were statistically significant ($p < .05$).

^bMultivariate regression $F(5, 147) = 5.13, p < .01$, for gender effect on five belief items ($n = 175$).

^cMultivariate $F(3, 214) = 3.48, p < .05$, for gender effect on three factor scores ($n = 240$).

^dMultivariate regression $F(5, 185) = 3.72, p < .01$, for gender effect on five basic demographic knowledge items ($n = 213$).

^eMultivariate regression $F(4, 191) = 5.15, p < .01$, for gender effect on four deficit knowledge items ($n = 218$).

^fMultivariate regression $F(4, 140) = 2.63, p < .05$, for gender effect on four socioeconomic knowledge items ($n = 167$).

^g $p < .05$.

^h $p < .01$.

Table VI. Significant Predictors of Beliefs, Attitudes, and Knowledge: Univariate Results for Respondent Age^a

Dependent variable	<i>r</i>	β	<i>F</i>
Seriousness: U.S. ^b	-.16	-.23	9.52 ^h
Factors ^c			
Isolation	.14	.16	5.77 ^g
Employment	-.19	-.23	13.90 ^h
Deficits	.13	.18	7.45 ^h
% with family contact ^d	-.18	-.16	5.11 ^g
% on public assistance ^e	-.19	-.17	4.57 ^g
% white ^f	.20	.25	13.76 ^h

^aResults presented above only when associated hierarchical univariate and multivariate regression analyses were both statistically significant ($p < .05$). β is the standardized regression coefficient from the univariate regression analysis.

^bMultivariate regression $F(5, 147) = 3.51, p < .01$, for age effect on five belief items ($n = 175$).

^cMultivariate regression $F(3, 214) = 9.97, p < .01$, for age effect on three factor scores ($n = 240$).

^dMultivariate regression $F(5, 185) = 2.68, p < .05$, for age effect on five basic demographic knowledge items ($n = 213$).

^eMultivariate regression $F(4, 140) = 2.44, p < .05$, for age effect on four socioeconomic knowledge items ($n = 167$).

^fMultivariate regression $F(5, 201) = 2.82, p < .05$, for age effect on five age and race knowledge items ($n = 228$).

^g $p < .05$.

^h $p < .01$.

set of dependent (belief, attitude, or knowledge) variables. Of the six such multivariate analyses done, all yielded significant ($p < .05$) multivariate effects. There were a total of 25 significant ($p < .05$) univariate effects (for ANOVAs for gender, the only categorical predictor showing more than one significant effect, see Table V; and for multiple regression analyses for age, the only continuous predictor, see Table VI). The nature of these univariate effects were elucidated by testing the significance ($p < .05$) of mean differences (post hoc Newman-Keuls tests used for categorical predictors involving more than two groups) or standardized regression weights (β s for age).

The respondent's gender was significantly related to 12 different dependent variables, accounting for nearly half of all significant univariate effects. Compared to men, women thought that homelessness was a more serious problem (in urban and nonurban areas and nationally) and that it was getting worse, were more supportive of federal spending to help homeless persons, had higher scores on the Employment factor and lower scores on the Deficits Factor, and believed the homeless population included greater percentages of women and the currently married and smaller percentages of the never married and persons with a criminal record and who had not completed high school.

Respondent race was significantly related to the estimated percentage of homeless persons aged 30–44: nonwhites providing higher estimates than whites, $p < .05$ for univariate $F(1, 204) = 7.93$. Respondent educational attainment was related to scores on the Employment factor: Respondents with no more than a high school education had higher scores than those who had gone to college, $p < .05$ for univariate $F(2, 216) = 5.54$ and for post hoc tests. Respondent occupation-based SES was related to the estimated percentage of homeless persons who had not completed high school: Those in moderate status, clerical/sales positions gave higher estimates than those in the lowest, unskilled and crafts positions, $p < .05$ for univariate $F(3, 143) = 6.77$ and for post hoc test. Party affiliation was related to the perceived seriousness of homelessness in nonurban areas, with Democrats perceiving greater seriousness than Republicans or Independents/others, $p < .05$ for univariate $F(2, 151) = 4.24$ and for post hoc tests. Respondents who reported having voted in the last election were more likely to view the problem of homelessness as getting worse, $p < .05$ for univariate $F(1, 151) = 10.92$, and those having direct contact with homeless persons at least a few times per year were more likely to see the problem of homelessness as serious in nonurban areas, $p < .05$ for univariate $F(2, 151) = 5.95$ and for post hoc tests. Effect sizes (mean differences, in standard deviation units; Cohen, 1977) for the 18 significant group differences described above (including those of Table V) were of modest magnitude (ranging from .25 to .66).

Age yielded significant effects on seven dependent variables. Compared to younger respondents, older respondents were less likely to see homelessness as a serious national problem and employment as critical in its cause and solution. Older respondents were more likely to see homeless people as (a) isolated from family and having infrequent contact with them; (b) being on public assistance; (c) having personal deficits; and (d) composed of a greater percentage of whites. The β s (and associated bivariate correlations) for the seven significant relationships involving age (see Table VI) were of modest magnitude (β s ranged from .16 to .25).

DISCUSSION

The results of this study, in combination with those from other recent surveys and polls, suggest extensive public support for homeless people. Even though “taxes” is probably a “dirty word” for most Americans, in the present study a full 58% were willing to pay extra taxes to help the homeless. In three other local polls (Barbanel, 1989; Lee, 1988; Lee, Jones, & Lewis, 1990; “Polls Show Majority,” 1991) and two national polls (Media

General Research, 1989; Toner, 1989a, 1989b), this percentage has ranged from 49 to 59%, an amazing consistency of public opinion given the differences in item wording, sampling location, and other methodological features. Though we did not explicitly ask respondents to rank order their concern about homelessness against other pressing social problems, there are some indications that it might rank near the top, exceeded perhaps only by drug abuse and crime (Novacek et al., 1991; Toner, 1989a).

Given such policy-related support, the generally sympathetic pattern of attitudes observed, and the tendency to endorse structural versus individual causes for homelessness (see Table III), policy-makers may have an opportunity to suggest some bold solutions. Policy-makers should be made aware that the public supports much more than just emergency assistance for homeless people. Thus, while a bare majority of respondents (53%) supports building more shelters, a clear majority (65% or more) supports interventions that would build low-cost housing, provide more jobs and job-training, and treat drug and alcohol problems of homeless people. Policy-makers should perhaps also be cautious not to suggest some unpopular alternatives (e.g., increased welfare spending).

In addition to their support, citizens also seemed well informed about the characteristics of homeless people, even when the characteristics involved personal deficits. Thus, in only 6 to 27 instances tested were more than half of the respondents inaccurate by more than 20 points in estimating the percentage of homeless persons showing a particular characteristic. Considering these data another way, in only 3 of the 27 instances did the mean estimate across respondents vary from the actual rate by more than 20 points (though, in this large sample, virtually all of the mean discrepancy scores showed a statistically significant deviation from the actual rate). However considered, respondent estimates for a wide range of characteristics of homeless persons generally were reasonably accurate.

Respondent estimates for the extent of mental illness among homeless people, a controversial topic among researchers (Snow et al., 1986; Wright, 1988), offer a good example of how the public's perception matches with reality. Most respondents (64%) gave estimates within 20 percentage points of an actual rate of 33% and the average respondent estimate was nearly dead accurate when compared to the 33% criterion. The most frequently cited estimate for mental illness among the homeless population, often based on the same criterion of prior psychiatric hospitalization, is about one third (Levine & Rog, 1990; Tessler & Dennis, 1989). It is only when more stringent criteria for mental illness (e.g., DSM-III diagnoses of specific major mental disorders based on the DIS) are applied that the public's estimate appears too high. Against such criteria, the estimates of many re-

searchers and other professionals working in the area would also be too high.

Such results on the general accuracy of public perceptions contradict notions that citizens in our nation hold many myths about homeless people. For instance, a 1986 Michigan Task Force on Homelessness listed several such myths, including that the homeless are perceived as middle-aged men, alcoholics, homeless by choice, and mentally ill (Solarz, Mowbray, & Dupuis, 1986). The present study's sample did not view homeless people in these ways. Rather, homeless persons were viewed as coming from a wide spectrum of our society. In addition to seeing the mentally ill and alcoholics as minorities among the homeless, most respondents (61%) also disagreed with the statement that homeless people choose their life-style.

Based on our findings, there are only a few areas where the public may have serious misconceptions about homeless people. Respondents believed that relatively few homeless persons were in regular contact with their families and they estimated high levels of drug abuse among homeless people. Such inaccuracies may follow from media coverage which often covers the role of drugs and social isolation in homelessness. The public may overgeneralize from such coverage. However, such inaccurate perceptions may also serve other, more psychological, functions. In the case of drug abuse, such a misperception is consistent with current popular opinion which blames many social problems (e.g., crime) on drugs. In addition to overestimating drug abuse, even when the most liberal possible operationalization was used in the interview study of homeless people (i.e., lifetime prevalence), a clear majority (75%) of respondents in this study also felt substance abuse to be a cause of homelessness (see Table III). Such simplistic views could help many respondents understand the disturbing and potentially guilt-inducing social problem of homelessness. In the case of drug abuse *and* family contact, the misperceptions could also help respondents psychologically distance themselves from homeless persons and the possibility that they might themselves one day experience homelessness.

In the case of criminal behavior, respondents tended to give overestimates when "criminal record" was defined in the local interview study as involving a felony conviction but underestimates when it was defined as having ever been arrested. While the overestimation is consistent with stereotypes which "blame the victim" (Ryan, 1971) and with the sorts of psychological mechanisms already discussed, the underestimation may reflect the public's lack of awareness about the prevalence of arrest among homeless persons. Such arrests are often for victimless charges such as breaking into abandoned buildings to seek shelter and other acts aimed at survival (Fischer, 1988). Note that a similar pattern of results appeared for the public's estimates of alcoholism and public assistance. When a looser

criterion from the local study was applied (lifetime diagnosis for alcohol abuse, benefits in the past year for public assistance), the estimate was too low. When a more stringent criterion was applied (6-month prevalence for alcohol abuse, benefits in the past month for public assistance), the estimate was too high. Such a pattern of results suggests that this study's data may be telling us as much about the implicit definitions used by the public for such characteristics as they tell us about the accuracy of public perception. Members of the public may not use consistent definitions of such characteristics but, "on average," use definitions that fall "in the middle of the road."

Taken as a whole, citizen estimates on the characteristics of the homeless population cannot be considered primarily negative nor primarily positive in direction. Thus, participants overestimated the extent of drug abuse and the length of time people were homeless and underestimated the extent of family contact, but they also overestimated the percentage of homeless people who were married. The more common picture of respondents' knowledge in this study perhaps was a mixed one, in that they generally provided estimates that fell within a reasonable range of actual rates for the homeless population. Characterizing public knowledge as positive or negative is highly influenced by how we chose to define the criterion for "accurate knowledge."

While the average citizen may be both supportive of and knowledgeable about homelessness, most items in this survey showed considerable variability. Thus, some citizens were very supportive while others were very *unsupportive*. Relatively few were supportive on all or most belief and attitude items. Some respondents were very accurate in their knowledge about the characteristics of homeless people while others over- or underestimated. Although it might be expected that knowledge items with means indicating the greatest divergence from the actual characteristics of homeless people would have high variability (e.g., see standard deviations for discrepancy scores on regular family contact, drug abuse, and criminal behavior in Table IV), other knowledge items on which the average citizen appeared more accurate also showed high variability (see standard deviations for having children and mental illness in Table IV).

Although there was high variability across respondents on many items, that variability was not as predictable as expected. Stereotypes, as well as common sense and some past research, suggest that one's political views, area of residence (urban vs. suburban vs. rural), contact with homeless people, religious affiliation, education, income, and occupational status, among other factors, ought to be related to beliefs, attitudes, and knowledge about homelessness. Although, when relationships were found they were in the expected direction, none of these background characteristics proved to be

a consistent predictor. In particular, we expected political affiliation to yield more relationships. Perhaps because of the extensive media coverage, which has educated all segments of the public, there appears to be bipartisan support for and understanding of the problem of homelessness in America. Such data could further encourage our political leaders to more seriously engage this problem and allocate the societal resources necessary for its amelioration.

Only gender and age emerged as consistent predictors of belief, attitude, and knowledge variables. Compared to men, women seemed more concerned about homelessness: They consistently rated it as a more serious problem and were more supportive of federal spending (and tax increases) to help homeless people. Women were more likely to see employment factors as implicated in homelessness and less likely to see homeless people as having personal deficits. Such findings support the existence of a growing gender gap on many social and political issues. Women were also more likely to estimate that the homeless population included more females and, perhaps consistent with such a perception, they also thought more homeless persons were married. Women may be especially affected by the increasingly frequent media reports on homeless women, children, and families.

Older respondents were less likely to see homelessness as a serious national problem or to attribute its cause and solution to employment. Older respondents were more likely to view homeless people as disaffiliated from family, having personal deficits, being on public assistance, and being white. Though this pattern of findings could be due to the more conservative political leanings of older persons, it could also be connected with their different experience with homelessness. Many in older cohorts directly or indirectly experienced homelessness during the Depression era and saw the hoboos common in subsequent decades. During these periods it is quite likely that more homeless persons were white, disaffiliated, and plagued by deficits such as alcoholism (Rossi, 1989, 1990).

Compared to the study's basic descriptive findings, these findings on the background predictors of beliefs, attitudes, and knowledge about homelessness appear somewhat less consistent with earlier surveys. While surveys exploring such relationships have generally found gender and/or age effects (Benedict et al., 1988; Kluegel & Smith, 1986; Lee, 1988; Lee, Lewis, & Jones, 1990), other factors have sometimes shown more potency as predictors. For instance, in the Nashville survey, gender was not a significant predictor and educational attainment and political orientation were potent predictors (Lee, 1988; Lee, Jones, & Lewis, 1990). Such inconsistencies, however, become less troubling when one takes into consideration the methodological variations among the studies and the generally small amounts of variance accounted for (consider the modest effect sizes and

betas obtained in the present study). As a whole, the various surveys (including this one) point out that most of the public holds positive views about homeless people and those views cannot be accounted for to any large degree by basic background characteristics. The formation of positive attitudes may involve unmeasured variables (e.g., type and amount of media exposure) or complex interactive processes that do not lend themselves to assessment through simply survey methods.

One basic datum from this study may help inform the debate that has been raging about the size of the homeless population. Those who wish to minimize the extent of the problem often appear to cite low estimates, while activists who hope to draw public attention to the problem produce higher estimates. Thus, the U.S. Department of Housing and Urban Development (HUD) in 1984 produced an estimate of 250,000 homeless persons nationwide (about 0.1% of the population), while the advocacy group Community for Creative Non-Violence estimated that there were as many as 3 million homeless persons during approximately the same period (over 1% of the population; Hombs & Snyder, 1982). Recent studies, some using sophisticated sampling methods, have generally obtained estimates well below the 1% figure but also considerably higher than HUD's 0.1% figure (Alliance Housing Council, 1988; Burt & Cohen, 1988; Freeman & Hall, 1986; Rossi, Wright, Fischer, Willis, 1987). However, all these studies, as well as the 1990 U.S. Census which for the first time made a serious effort to count homeless people (see Barringer, 1991), provide single time-point or, at best, yearly estimates and inevitably yield underestimates because of the methodological difficulties inherent in locating homeless persons.

Since we asked a fairly representative sample of the general public whether they had ever been homeless, the data obtained in this study can be used to approximate a lifetime estimate for risk of homelessness. Starting with the 4.2% past experience with homelessness reported in this study, assuming this rate applies nationally, accounting for differential rates of reported homelessness and future life expectancy among age cohorts, and adding in the currently homeless who were not sampled (a conservative point prevalence estimate of 400,000 was used; Rossi, 1989), we obtain a lifetime risk estimate of 6.7% for the U.S. adult population (12.2 million people). This 6.7% figure is likely to be an underestimate for a number of reasons: Persons without phones as a group are probably at a higher risk for homelessness, some persons may have been reluctant to reveal on the phone that they had been homeless, the rate of homelessness may be higher in areas other than the site of this study, and the rate of homelessness may be increasing (Reyes & Waxman, 1987, 1989) and continue to do so over the adult life-span of the current U.S. adult population (the computations above were conservative in assuming no change in the rate over time). Of

course, this 6.7% rate could also be an overestimate if respondents had an overly broad definition of homelessness or if the rate of homelessness is unusually high in the area where this study was conducted.⁵

However, support for such a high estimate comes from two recently completed surveys which asked similar questions on respondents' experience with homelessness. In a local survey of 852 persons selected at random from the telephone directory in Tulsa, Oklahoma, 5% reported having been homeless (Novacek et al., 1991). A national study found that 12% of the 1,507 persons polled reported having stayed in a shelter for homeless people, slept on the streets, or considered themselves homeless while living temporarily with friends or relatives (B. Link, personal communication, February 21, 1991). If one excludes the most controversial category of persons who have doubled up with friends or relatives, then 7% of the respondents in this national survey reported prior experience with homelessness. Such high estimates are consistent with developing knowledge on the episodic nature of homelessness (Sosin, Colson, & Grossman, 1988; Sosin, Piliavin, & Westerfelt, 1990; Toro & Wall, 1991b; Toro & Warren, 1991). Researchers now recognize that, over a long time frame, many different people pass in and out of homelessness and most experience short episodes of homelessness. High *lifetime* rates are not so surprising in this context.

It is curious that, even among advocates for homeless people, no one has attempted to produce such lifetime risk estimates. In the discussion of many other social problems (e.g., criminal behavior and victimization, heart disease, family violence, motor vehicle accidents, AIDS), such estimates are routinely used to argue for a greater allocation of societal resources. It also is curious that scholarly discussions of the methodological approaches for estimating the extent of homelessness in America have omitted this very low cost methodology but have been exceedingly thorough about other more costly methods (e.g., Appelbaum, 1990; Rossi, 1989). It seems to us that the methods discussed and debated at length, such as the "census" approach used in the widely cited study by Rossi et al. (1987), are at least

⁵A detailed description of the methods used to compute the lifetime risk estimate for homelessness is available from the authors. Although some serious methodological issues can be raised about extrapolating from a local survey to estimate a national rate of homelessness, such extrapolation has also been used to some extent to obtain virtually all existing national point and annual prevalence estimates (see Appelbaum, 1990; Rossi, 1989). Note that the item on prior experience with homelessness in this survey was asked following a number of items on the respondent's contact with homeless people and was worded as follows: "Have you ever been homeless yourself?" Because no explicit definition of homelessness was provided, it is likely that respondents included episodes in which they were "doubled up" with friends and relatives. Data from an as yet unpublished national survey suggest that nearly half of the people who consider themselves as having been homeless experience such episodes but have never slept in a shelter or on the streets (B. Link, personal communication, February 21, 1991).

as inaccurate as the telephone survey method, though they have the effect of consistently producing underestimates. Perhaps it is believed that people will not provide accurate reports of their own homelessness or may use definitions of homelessness that are less rigorous than those of the researchers. Or perhaps Americans, including social scientists, are not prepared to think about "average people," like themselves, as having any risk for homelessness.

A number of studies suggest that Americans are less supportive of the poor and display a more inconsistent pattern of beliefs about poverty than observed in recent surveys on homelessness (e.g., Kluegel & Smith, 1986; Lee, 1988; Lee, Jones, & Lewis, 1990; Huber & Form, 1973). Though there are many possible explanations for such divergence, one concerns the role of the media. As noted earlier, there has been extensive exposure of the public to the problem of homelessness in both the written and printed media. Furthermore, most of the coverage in the 1980s was positive, highlighting the plight of homeless people, pushing policy-makers to respond, and perhaps helping to mobilize many individuals to donate their time and money to help those less fortunate than themselves (Lee, Link, & Toro, 1991). As noted by Lee, Jones, and Lewis (1990), the media have helped create a "public arena" in which views about homelessness have been made more homogeneous. In fact, it seems possible that the media as a social institution may now be in the process of helping to shift the public opinion on homelessness yet again, this time *against* homeless people. Beginning in the Spring of 1990, just when this survey was being completed, a series of newspaper and other media reports began presenting a different "angle" on homelessness in which "aggressive panhandling" is deplored, vicious attacks on homeless persons are covered in detail, and new laws and ordinances harmful to homeless people are discussed (e.g., Furillo, 1990; Woodruff, 1990). It appears that such negative media portrayals have yet to influence public opinion, since studies completed after the Spring of 1990 continue to show consistently strong public support for homeless persons (B. Link, personal communication, February 21, 1991; Novacek et al., 1991; "Poll Show Majority," 1991). However, if such media portrayals persist, public opinion may again be swayed.

Several limitations of the present study highlight considerations for future research on the public's view on homelessness and poverty. Though the resulting sample was roughly representative of the local population, the high refusal rate (50%), common to such telephone surveys, remains worrisome. Such a high refusal rate, perhaps combined with respondents' desire to provide socially desirable responses, could account for the generally positive views found. Future studies may want to consider paying respondents for their time and cutting the number of items and time required. Since it

is unknown how much such strategies would reduce the refusal rate, future studies may also want to investigate their impact. Studies might also attempt to counteract social desirability through introductory instructions or by including scales that can be used to statistically control for this problem. The exclusion of persons without phones from this study was unfortunate since such persons include many of the poor and virtually all of the homeless. One would expect that such groups would have even more favorable attitudes about homelessness. Unfortunately, the alternatives for including such persons in a survey of this kind involve very costly face-to-face canvassing.

Given that Americans may feel differently about the homeless versus the poor more generally, it would be useful to explore, in the same study, beliefs, attitudes, and knowledge about both groups. Though the effects were not large, one study found regional differences in attitudes about homelessness (Lee, Lewis, & Jones, 1990). Thus, given the relative ease of conducting such telephone surveys, future researchers should whenever possible also use random-digit dialing methods to obtain nationally representative samples. As in the present study, future research should attempt comparisons of public knowledge about the characteristics of homeless people to actual rates. Future studies should also continue to use at least some items from prior studies so that temporal shifts in public opinion can be assessed.

We end by considering a question posed by the now coherent findings that have been emerging from surveys such as this: If public opinion is so supportive of homeless people and related policy change, then why is more not being done to solve the problem of homelessness in America? One answer concerns the nature of politics in America. With so many competing interests, politicians tend to pay attention only to those groups that are well organized and able to apply severe pressure. It is our impression that advocacy organizations have only in the past few years become strong enough to begin to apply such pressure to push for social change. It might also be that the support for real policy change is actually rather "soft." Recent changes in attitudes against homeless persons, if true as indicated by recent media reports, suggest the public may be prone to large-scale attitudinal shifts over very short periods of time. Also, while the typical American may be willing to support increased taxes for homeless people in the abstract, if actual candidates advocated such an increase, they might reduce their chances of being elected. Future research should perhaps attempt to tease out what sort of taxation (e.g., property, sales, income) the public might accept to deal with homelessness. It is also clear that the "NIMBY" (not in my backyard) phenomenon applies to homelessness as well as other social issues (e.g., mental illness) which involve the placement of undesirable groups in the midst of the public eye: We suspect that few

citizens would support low-income housing in their own neighborhoods. Finally, politicians and other policy-makers may also be unaware of the extent of public support for policy change in this area. We hope that the findings of the present study, and others like it, will be used to help change this state of affairs when it exists.

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