

Recommendations Report: Summary and Next Steps from a Survey of Individuals Living Outside in New Orleans, Louisiana within French Quarter Management District Boundaries in May - July 2021

Accompanying Data Report Available for Download Here

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Analyses and Interpretations of Data

Given the wide array of data in the complete report, for which 129 unhoused individuals were surveyed about their needs and experiences, seven themes were selected to emphasize trends within the data and to bridge important takeaways for consideration by stakeholders and all those who may be involved in policy or program development for the population of individuals who live outside in the French Quarter Management District.

These themes were pulled from both quantitative measures and qualitative reflections revealed in the data set. These seven themes parallel directly those highlighted from the prior smaller sample size (56 individuals out of the eventual 129) studied in the FQMD-contained French Market Corporation (FMC) area specifically, and it is notable that the demographics, realities of homlessness and other adverse life experiences, familiarity with and participation in accessing services, and interactions with public safety and police officers reported by respondents were similar from the smaller sample into the expanded one.

<u>Theme One: Marginalized Demographics and Adverse Life Experiences</u>
<u>Over-Represented in Population</u>

The first theme apparent in the data yielded from this study is that individuals who are of marginalized demographic populations and those who have faced significant adverse life experiences are over-represented in the sample population as compared to their representation in the general U.S. population.

Regarding individuals from marginalized demographics:

- LGBTQ+ identifying individuals are represented in the unhoused population of the French Quarter at more than four times their rate of representation in the U.S. adult population.
- Individuals who experience their gender identities as different from the gender identities commonly associated with the sex that was assigned to them at birth (e.g., individuals who may identify as transgender, gender non-conforming, nonbinary, etc.) are represented in the FQMD unhoused population at more than 15 times their rate of representation in the U.S. adult population.

- Individuals who identify as American Indian, Alaska Native, or as Native/Indigenous American are represented in the FQMD unhoused population at a rate slightly more than three times their rate of representation in the U.S. adult population.

And regarding those who have faced significant adverse life experiences:

- Those who have been in foster care are represented in the FQMD unhoused population at more than eight times the national rate.
- Those who have not completed a high school education are represented in the FQMD unhoused population at more than four times the national rate.
- Those who have experienced domestic violence are represented in the FQMDunhoused population at more than three times the national rate.
- Individuals within the FQMDunhoused population report having been to prison at 19 times the rate of the general U.S. adult population.

It should be noted that because 129 individuals is a small sample size, any one individual within the sample can skew percentage-based results more significantly than would occur in a larger sample, as each person represents a larger portion (and thus proportion) of the whole. Though, it is notable that, regarding the comparisons made between the FQMD unhoused population and the U.S. population as a whole, these rates did not change significantly from the smaller FMC sample to the larger, FMC-inclusive FQMD sample.

The data within this report can also meaningfully be understood in terms of absolute numbers instead of percentages and still be relevant, as extrapolation to other populations of individuals experiencing homelessness is not the intention. Rather, the data seeks to describe the specific individuals currently experiencing homelessness in the French Quarter area only.

Thus, it is just as relevant to emphasize that, in the roughly 100 square blocks of the FQMD area, 72 individuals who have experienced domestic violence are sleeping on the streets, as are at least 28 members of the LGBTQ+ community, for instance.

Such data is relevant for several reasons. First, due to societal and systemic discrimination, those of marginalized demographics, whether along racial lines or lines of gender identity and sexual orientation (or otherwise), are often more likely to face adverse life experiences, including homelessness. For instance, significant research exists on the higher incidence of housing instability and homelessness among the trans and gender non-conforming population in the United States, such as in the 2015 U.S. Transgender Survey, in which

32% of the 274 individuals surveyed from Louisiana reported having experienced homelessness at some point in their lives.¹

Secondly, adverse life experiences can have reciprocal relationships with homelessness. These adverse life experiences can make it easier for someone to become homeless or to face increased obstacles in exiting homelessness. Having a criminal record can cause someone to experience hiring discrimination or having abandoned an apartment to flee domestic violence can create an eviction record for someone that makes it harder for them to rent in the future. Homelessness, in turn, can also make these experiences more likely, such as a child living in shelters not having sufficient stability to finish high school or an adult with nowhere else to sleep but the streets being repeatedly cited for quality of life crimes such as obstructing the sidewalk, eventually incarcerated, and thus justice-involved.

Theme Two: Significant Medical Complexities and Histories of Homelessness

The second theme evident from the survey data is that the individuals experiencing homelessness in the French Quarter are living with significant medical complexities and have had extensive histories of homelessness throughout their lifetimes.

Within the data set, over 70% of individuals living outside in the French Quarter reported having been diagnosed with at least one significant disabling condition, and 50.38% reported having been diagnosed with two or more such conditions.

50% of respondents reported that it had been two or more years (continuously) since the most recent time they had a safe, stable place to live and 62.5% of individuals living outside in the area reported having been homeless for six months or longer in their most recent (current) episode of homelessness. 80.62% of respondents reported having experienced homelessness for more than two years of their life (total, including prior and current experiences/periods of homelessness).

Such information is important to highlight for multiple reasons:

 The presence of both significant disabling conditions and a significant history of homelessness is the combination needed to be eligible for many HUD-funded programs, such as permanent supportive housing, through which individuals are placed into housing (subsidized with a Section 8-style voucher) and supported with

¹ https://transequality.org/sites/default/files/docs/usts/USTSLAStateReport(1017).pdf

intensive case management services, which is considered a national best-practice program with high success rates.²

- The duality of these difficulties significant medical conditions and significant homelessness has an impact on individuals' ability and willingness to seek out services. Some individuals in the surveyed population reported significant mobility issues that impeded them even from utilizing nearby public restrooms, while others referenced memory issues that made them feel uncertain about traveling to service centers or being able to recall appointment times. Others cited significant depression and discouragement from homelessness as a barrier to seeking services, while others reported trying to reach services over their years (or decades) of their homelessness and eventually giving up. Additionally, homelessness, for any length of time, requires that significant time and energy be spent on daily survival, which is compounded by the existence of conditions that require additional time and energy to manage. Often, all of this time and energy cannot then also be spent on seeking out services or making/pursuing long term goals.
- Most seriously, long-term homelessness, especially when experienced by someone
 with significant medical conditions, is a serious predictor of a shortened life
 expectancy. Research has indicated that individuals experiencing homelessness
 face a life expectancy that is nearly two decades shorter than that of their housed
 peers.³

Theme Three: Willing but Struggling to Access Services

The third theme apparent from the data is that individuals surveyed by and large did not access nor were they connected to any services, a phenomenon that was attributed to both a lack of information about services and, moreso, barriers to accessing those services.

Regarding information access, more than 1 in 4 surveyed individuals reported they were not familiar with local services, such as drop-in centers or shelters. Some of this group was newer to the city, with two individuals having arrived as recently as the past week and three others within the past month, but about half of the individuals who reported being unaware of such services reported having been in New Orleans for at least three months.

² https://files.hudexchange.info/resources/documents/Housing-First-Permanent-Supportive-Housing-Brief.pdf

³ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5739436/

However, three-fourths of respondents did report being familiar with local services for either meeting daily, basic needs (showering, eating, using the restroom, changing clothes) or for long-term case management (applying to housing or securing benefits like food stamps, medicaid and disability benefits), and yet utilization of or connection to either of these types of services was low across all those surveyed.

For instance, the majority of individuals reported primarily bathing and washing up in facilities not designed for such activities (such as attempting to perform "bird baths" in public bathrooms), obtaining food from leftovers, street-based donations, or trash cans, finding housed friends and acquaintances who might them let them in to use their bathrooms, or finding clothes and paying to do laundry at local laundromats, as opposed to utilizing nonprofit agencies which they were aware could provide these goods and services.

Similarly, more than 75% of individuals reported they had not met with any case manager, social worker, or outreach worker any time in the past 6 months, and the average number of interactions with a case manager, social worker, or outreach worker among the respondent population was 0.90 times (as in, less than once) in the past 6 months. 81.73% of respondents who identified both as homeless and actively seeking housing reported having no housing case manager with whom they were working. Notably, many housing programs in the city, especially those targeted at individuals who have experienced homelessness, necessitate that the unhoused individual seeking housing be "navigated" through the system by a case manager in order to gain access.

About 40% of the surveyed population appears eligible for SSI or SSDI but is not receiving it and about one-third report being eligible for Medicaid but not having it.

Such information is key because it indicates that there is indeed a knowledge gap about resources among the unhoused population in the French Quarter, but that increasing knowledge alone is an insufficient intervention to connect individuals to services, as even those who know about services face significant obstacles in trying to access them.

Regarding basic services (hygiene, food, clothing), even those who know about nonprofit services generally instead use elements of their immediate geographic environment to meet their needs, which respondents attributed to a mixture of barriers at drop-in sites (distance, rules, specific hours that sometimes change, limited capacity, having been banned for past behaviors) and barriers to travel. Traveling the distances to existing agencies is difficult due to mobility and cognitive impairments, concerns about leaving items behind unsecured, lack of access to bus fare, having to carry heavy items, a lack of familiarity with other neighborhoods, and the significant amount of time and energy individuals already dedicate daily to survival matters (finding food, finding a safe place to sleep, maintaining one's personal belongings) consistently superseding finding time and energy to restructure patterns of handling these survival matters or shifting to focus on long-term goals.

Similar barriers exist regarding connections to long-term case management and housing, the access processes for which also generally entail traveling to a specific site at specific hours to be able to meet with a case manager without specific guarantee that a case manager would be available at that time. Some respondents reported various efforts that ended with a loss of contact with their case manager, confusion about the process, or frustration with the process itself or the length of time the process itself and waiting for available assistance both took.

All of this information is particularly pertinent given the majority of individuals' willingness to connect to services. Notably, only 3.87% of respondents stated they would not accept safe, affordable housing if it were offered to them while 96.12% of all respondents stated they would accept (95.34%) or consider (0.77%) housing if it were offered to them.

Surveyors also commented that, after the conclusion of many surveys, many respondents would speak casually about the things they needed and asked surveyors for direct assistance or referrals. Respondents asked for help with everything from Medicaid enrollment to getting a government phone and from housing assistance to help purchasing a bus ticket to live with family in another state. When surveyors brought up available drop-in resources, respondents often replied with previous failed (and frustrating) attempts to access such services and emphasized their desires for someone to help them where they were, with several respondents using the open-ended space for reflections at the survey's conclusion to specifically ask for a greater presence of social service providers to come to them and provide services in their immediate area. Among the limited facilities and services that respondents named as ones they liked and did utilize frequently, almost none were nonprofit-based, but most were instead church and community groups who exist (and/or come directly to) where unhoused individuals are on the streets, such as the Vieux Carre Baptist Church and Southern Solidarity.

Theme Four: Focused on Housing

The fourth theme evident from the survey responses is that, by and large, respondents are focused on housing as the most effective intervention for them, and in some cases, one that they view as a precursor to other services and changes in their life.

Notably, when identifying interventions they felt could be useful in ending their current homelessness, 54.30% of the potential interventions named as the most useful by surveyed individuals seeking to end their current homelessness involve the direct provision of or connection to housing, whether that be the provision of rental assistance, help obtaining a housing voucher, help finding affordable housing, or placement assistance into a group home. The next largest proportion of responses was interventions aimed at

increasing or obtaining income, which accounted for 19.89% of all responses, and which many respondents tied to affording housing.

Furthermore, some elements of the data emphasized the extent to which housing is a needed first step to respondents' abilities to tend to other dimensions of their wellness. For instance, while, at various points, respondents cited substance abuse treatment as something they were either open to or interested in, very few cited it as a useful intervention to ending their homelessness, as getting sober or reducing their intake of substances alone would not mean they could find or afford housing. This would be especially true for respondents who are among the 70.54% that reported living with significant disabling conditions, who are ostensibly less able to sustain gainful employment and thus likely to need the financial subsidy of a voucher or other housing program to be able to ever enter into and sustain housing, even if they are able to attain sobriety or lessen their substance use. Other respondents cited difficulties with following through with medical treatments that had been prescribed or advised to them because of a lack of housing, such as having their medications stolen or being unable to undergo needed procedures due to a lack of a safe place to recover.

Indeed, many (23) of the 30 individuals who focused on access to social services during the open-ended space for general reflections at the end of the survey emphasized the need for housing and long-term connections to services, asking for more housing options, a shorter wait for housing, clearer means of accessing housing, and the provision of direct assistance to unhoused individuals in the French Quarter who are seeking housing, namely through the co-location of service providers where unhoused individuals already are - on the streets.

Keeping this focus in mind is important as there are so many things that individuals experiencing homelessness in the French Quarter lack, but to focus on providing them *instead* of connections to housing is neither the stated priority of the affected population nor what has been shown to be effective in research on housing programs across the country, which, as cited in the data report, has repeatedly indicated that it is more effective and efficient to provide housing with intensive case management supports without requiring that individuals first address other dimensions of individuals' wellbeing, such as their substance use. Respondents certainly stated an openness and a desire to receive assistance with other matters as well, but understood housing as the cornerstone to resolving their homelessness and improving their overall wellbeing.

Additionally, while it is generally known that there is not enough affordable housing or supportive housing vouchers for all those who are experiencing or have ever experienced homelessness for any period of time, unprecedented funds toward such programs have come out of the newly-issued American Rescue Plan Act and it is currently more possible to connect individuals to housing resources than it has been recently.⁴ Thus, this focus on

⁴ https://endhomelessness.org/help-is-on-the-way-the-american-rescue-plan-act-becomes-law/

housing by respondents should be viewed not as an unrealistic goal but rather as a potential to match those motivated by housing to available resources as quickly as possible.

Theme Five: High Rates of Policing and Emergency Service Utilization, but not by All

The fifth theme pulled from the data is the high rates at which a small portion of the French Quarter unhoused population interfaces with police and utilizes emergency services, namely emergency medical services and ambulance rides, and the similarly high rates at which some members of the population do not interact with police nor utilize these services at all.

52.80% of individuals reported not having interacted at all with police in the past six months. This was the most common experience of respondents - that they had had no interactions with either group.

Meanwhile, 16% of respondents reported having interacted with police 10 or more times in the past six month, and the interactions from this group alone represent 71.94% of all reported police interactions.

Similarly, while 54.04% of respondents reported never having been to the hospital in the past six months, the 45.96% of respondents who had been to the hospital at least once in the past 6 months reported a cumulative 327 visits to the hospital via the emergency room and 253 ambulance rides.

The level of interaction with police and emergency services among those who are high utilizers of these services is especially striking when viewed in contrast to the low levels of social services contacts or long-term and preventative medical care that unhoused individuals in the French Quarter area are receiving. The ratio of police interaction to case management interaction averaged across all respondents was 3.3:1 - meaning that individuals experiencing homelessness in the French Quarter are, on average, interacting with police officers at more than three times the rate they are interacting with case managers, social workers, or outreach workers who could assist them in exiting homelessness. Similarly, while more than 45% of respondents reported they had been to the hospital via the emergency room in the past six months, less than one-third are enrolled in any form of primary care. Such disparities also represent a very costly form of interacting with those who are unhoused, as police interactions (especially those resulting in any form

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of court involvement or incarceration), ambulance rides, and emergency room visits are among the most expensive forms of government-funded services/response, including in comparison to the provision of intensive, long-term services such as Permanent Supportive Housing.

There is no significant higher correlation within the data set between those who frequently interact with emergency services of any kind (police, medical, ambulance) and those who are connected to housing case management services. The data does not indicate that emergency service interactions have shown to be a significant entry point to nor predictor of interactions with other longer-term social service providers.

The reality that, in the past six months, slightly more than 50% of individuals in the French Quarter unhoused population have not interacted with the police, and, similarly, slightly more than 50% have not been to the hospital is also noteworthy, because it indicates that this portion of the population, who has similarly high overall rates of disability and long-term homelessness as the rest of the population, is then seemingly not being seen or served by anyone - emergency services nor case managers. Thus, interventions targeted only at those who are high utilizers of emergency services would still not serve about half of the population who is similarly eligible (>50% appearing eligible in both groups) for programs that could end their homelessness and who report being similarly interested in doing so.

Theme Six: Negative Effects of Homelessness Are Most Seriously Felt by Those Experiencing Homelessness

The sixth theme is that the negative effects of homelessness are most seriously felt by those experiencing homelessness. What this means is that while interviews with stakeholders (business owners, residents, police, etc.) all touched on the difficulties of managing the negative effects of having a large population residing on the streets of the French Quarter, these difficulties are most keenly felt by unhoused individuals themselves.

That is, complaints about things such as the presence of fecal matter and urine in public spaces, an abundance of trash, crowding and long-term occupation of public restroom facilities and parks, the presence of personal items (luggage, blankets) left on sidewalks, and occasional public outbursts by individuals experiencing emotional or psychiatric crisis were mentioned by various stakeholders. What the data reveals is that these issues are symptoms of many difficulties faced by the unhoused community and that these symptoms are also then difficulties themselves for unhoused individuals, for instance:

 A lack of bathroom access causes individuals to relieve themselves on the street which is difficult both because it does not afford individuals dignity and privacy, and because the waste left behind from individuals relieving themselves outside is unpleasant to sleep and live alongside.

- Insufficient trash receptacles enable trash pile ups that attract unwanted vermin who carry diseases that primarily affect unhoused individuals.
- A lack of secure storage for belongings causes individuals to try to stash them around the French Quarter during the daytime and risk losing their belongings anyway.
- A lack of case management presence and connections to treatment leave individuals to experience and try to manage their personal, health, and mental health crises in public. This is difficult for those experiencing these crises and for their community members, as individuals are both themselves experiencing crises in public (and sometimes being policed or ridiculed for them, but rarely then being connected to meaningful support afterward) as well as seeing their community members struggle with these crises in public.

In fact, many respondents took time to describe both their personal challenges in navigating things like limited bathroom access as well as community-level struggles with things like maintaining a clean environment free of vermin or hypodermic needles. For instance, a notable group of respondents reported relieving themselves outside as a last resort when public restrooms are closed both because doing so has negative effects on their living environment and because the experience of doing so is notable for the lack of privacy and dignity it affords. One respondent stated that "picking up needles" was the main thing they did with their time during the day in an effort to keep the sidewalks of the French Quarter clean and other respondents reported their selection of sleeping locations and early morning departure times from those locations were selected with a mind toward inconveniencing as few people as possible.

While this theme may seem obvious, it is emphasized here because it reframes the struggles of those experiencing homelessness as not only difficult for visitors, employees, and residents to witness but acutely painful for those who are unhoused to experience themselves. With this reframing, conversations can be had that center dignified solutions to these issues, and energy can be diverted from consideration toward levying additional punishments for the natural and difficult realities of homelessness.

<u>Theme Seven: Significant Personal and Communal Ties to the French</u> Quarter

The seventh and final relevant theme pulled from the data is that there is a significant sense of community among many individuals experiencing homelessness in the French Quarter area and that many feel significant personal ties to the French Quarter itself.

Regarding the sense of community, individuals stated over and over again that their community in the French Quarter area was their family, and some respondents reported having lived in the French Quarter for over four decades. Respondents repeatedly reported that this sense of community and familiarity afforded them a sense of peace and security that provided some stability during their experiences of homelessness, which they did not feel was offered in shelters or other service centers they had tried to utilize.

This does not mean that individuals are unwilling to move into housing, as only two respondents in the data set both: (a) stated they would not accept housing offered to them and (b) identified no ideal living arrangement other than the streets. Rather, it indicates that even when these individuals are connected to services, many of these individuals will continue to visit and enjoy the French Quarter, as millions of tourists and locals alike do every year.

For instance, one now-housed individual was encountered spending time in Latrobe Park with other respondents. That individual stated they had been homeless in the French Quarter for many years but was now housed, sober, and living stably with their young child. They did not participate in the survey but reported coming back to the area a few times a week not only to see their friends but also to encourage them to make similar progress.

Such connections need to be highlighted both because they correct beliefs that unhoused individuals are only in the French Quarter to "take advantage" of items uniquely available there - such as panhandling opportunities or alcohol - and also because it emphasizes that unhoused individuals in the French Quarter often view themselves as part of a community that has been uniquely welcoming to them and which they are proud to be a part of, just as many housed individuals throughout the city of New Orleans feel about their own neighborhoods.

Recommendations for Serving the Population: Best-Practice Programs

Service Recommendation One: Evaluate Programs and Promote Meaningful Partnerships for Long-Term Resource Allocation

Evaluating existing programs and strategically using partnerships with existing programs that have been determined to be efficient and effective in their attempts to meet the needs of unhoused individuals is key and prerequisite to service planning within the French Quarter by the FQMD.

Practical Program Evaluation

Multiple programs already seek to provide assistance to unhoused individuals in the French Quarter area, and the focus and method of each program varies. These currently existing programs include the Law Enforcement Assisted Diversion Program (LEAD), the New Orleans Police Department's Homeless Assistance Unit, the Unity of Greater New Orleans Welcome Home Outreach Program, various nonprofit sites that aim to meet basic needs like hunger and hygiene (Saint Jude's Community Center on Rampart Street (meals seven days per week), the Vieux Carre Baptist Church on Dauphine Street (meals, showers, clothing, haircuts on Fridays, along with other community building opportunities), and Saint Mark's United Methodist Church on Rampart Street (meals on Sundays)).

In determining which of these programs could be most impactful in the French Quarter to address the needs of the unhoused (and thus perhaps recipient to homeless services funds accessible to the FQMD and/or other agents), it is important to consider how each program meets (or seeks to meet) stated and observed needs of the population, how much of the population is able to access the program's services due to its unique eligibility factors, how low barrier/accessible the services are for those who are eligible, how efficient the service delivery model of each program is, and how the various services align with FQMD goals and with evidence-based programs known to best serve vulnerable unhoused populations.

Some example direct questions to help make these considerations are included below:

- What are the eligibility guidelines for this program? Based on data yielded from the survey of this population, what proportion of the population would meet those eligibility guidelines?

- Programs that only target a portion of the population do not have to be avoided, but should be pursued with the acknowledgment that not all individuals will be served. Consideration should be given to what stands to be aided or resolved with various choices in focus. For instance, while the LEAD program focuses on serving those who interact frequently with law enforcement and thus would be unlikely to focus on more than 50% of the unhoused population in the French Quarter per survey data, this focus helps to alleviate significant burden on law enforcement, as data indicates that the 16% of respondents who reported having interacted with police 10 or more times in the past six months represent 71.94% of all police interactions reported by respondents.
- What are the accessibility barriers to this program?
 - Accessibility barriers to social services programs were reported frequently by respondents who stated that they struggled with mobility, memory, mental illness and other health conditions, safety concerns, lack of knowledge about services and/or how to navigate the city, and hesitancy around settings that felt too restrictive or institutional in nature, among other obstacles. Thus, programs that replicate and/or do not sufficiently eliminate these barriers should be assessed for their true accessibility. For instance, outreach models that first meet clients on the streets but then require they come into the office to actually complete paperwork or make progress toward housing and benefits access were repeatedly cited as difficult to follow up with or confusing to respondents. Similarly, programs which serve mainly to transport clients to services elsewhere - such as to existing drop-in centers where housing case workers are - do not address the accessibility barriers inherent in these centers, such as long wait times, limited staff capacity, and the need to return repeatedly to accomplish goals, which has been reported to largely not be feasible for individuals to do on their own. Per respondents' reported preferences, models and programs that provide long-term service connection (to housing and benefits) where unhoused individuals are (literally, on the streets) without the need for them to independently or primarily travel to or follow-up with service providers at other locations should be prioritized.
- What is the efficiency of service delivery within this model? What is the efficacy of the service delivery within this model to meet the needs of unhoused individuals?
 - Given the limited nature of funds to potentially be used for programs aiding unhoused individuals, consideration should be given to efficient service delivery. This consideration exists along multiple levels: both (a) how efficient is the actual service delivery model (how many staff are used, what resources

are needed?) as well as (b) how effective is the model at resolving homelessness, as opposed to simply interacting with those who are experiencing homelessness?

Regarding (a), consideration should be given to maximizing staff function in these programs so that resources, such as funding for staff positions, are used most efficiently. Given current limitations present elsewhere in the housing system, efficiency is maximized when a single staff person can complete the range of functions needed to connect unhoused individuals to needed services, such as by themselves being trained as a case manager and integrated into the local housing system so that their time is not spent simply referring (or even transporting) individuals to other housing case workers who have fixed capacity and limited ability to follow up with clients who may not then know how to independently return to their offices. Positioning service providers in the French Quarter who cannot themselves actually complete the tasks needed to enroll individuals in housing or services is inefficient because it uses staff funds, uses the time and energy of unhoused of individuals, utilizes staff capacity and time of other service providers (namely those at drop-in centers or other outreach workers, who already have limited capacity to take on new cases), all without actually having a reliable way to ensure individuals are connected to needed services, such as housing. Data yielded from the survey shows that while there is a gap in unhoused individuals' knowledge about available services, about 75% of individuals know about available services but struggle to access them for reasons beyond transportation alone, and thus seeking to focus on having service providers simply inform individuals of, or even transport individuals to, available services, is not the most efficient use of resources.

Regarding (b), the most effective intervention to ending homelessness cited by respondents was housing, and this is confirmed by significant research about the successes of evidence-based programs that focus on the provision of housing, such as permanent supportive housing. Similarly, respondents frequently used open-ended space to request more opportunities to connect to housing, benefits programs, and hygiene services. Thus, efforts that focus on other services *instead* of these may in some way assist individuals who are unhoused but not efficiently or effectively end their homelessness, such as through the provision of food, clothing, or other basic goods. The provision of these basic goods could certainly create opportunities for a high

volume of interaction with unhoused individuals in the French Quarter but this provision of these basic goods does not, in and of itself, lead to the resolution of homelessness. Accordingly, efforts to provide direct goods and more basic services should be prioritized to the extent they are needed to preserve health and safety and, whenever possible, integrated with opportunities to provide case management that connects individuals to housing and other services that will actually resolve their homelessness.

Long Term Consideration: Partnership for Capital or Investment Projects

Ongoing tax policy changes create some unknowns about the overall amount of resources that could be directed toward interventions for the unhoused by the FQMD and its partners. Primary consideration in this report will be given immediately below to efforts that would connect unhoused individuals to housing and other services, through the provision of programs such as outreach case management, both because they are relatively low-cost models and because they can create further information about what services and resources are needed by yielding further data on things like wait times for housing among individuals who are actually engaged in attempting to seek those services. However, should significant funds be levied in the future and specific data be available on what type of housing or other services be most needed by unhoused individuals in the French Quarter, funding could be considered for capital or investment projects. This has been done by other BIDs, interest groups, and public benefit corporations both locally and around the country.

Locally, the Downtown Development District has made significant investment in the City of New Orleans Shelter and Engagement Center (also called the "Low Barrier Shelter) and in the startup of programs like LEAD and Assisted Outpatient Treatment (mandated mental health court). Elsewhere, groups like the FQMD have partnered with nonprofits and other city agencies to create clinics, housing buildings, and alternative living sites, like RV parks none of which necessarily have to exist within the boundaries of a funding entity's district but which can be accessed by unhoused individuals living in the funding entity's district. One such example is the spectrum of health and housing initiatives funded by the Downtown Austin Alliance (information available here). Any eventual funding of such initiatives should be subject to the same critical programmatic evaluation inquiries outlined above, focusing on accessibility of services, how well services meet the unhoused population's needs, and how efficient and effective the service models are at utilizing resources and at ending homelessness.

Neighborhood-based street outreach involves the deployment of outreach case managers in a specific, hyperlocal area to tend to the needs of individuals experiencing homelessness there. The model combines (1) basic outreach canvassing, through which an outreach worker can interface with all unhoused individuals in an area and provide information about and appropriate referrals to services and (2) direct provision of case management services, through which an outreach worker takes on a focused caseload of the area's unhoused individuals who face the most barriers in accessing services on their own and provides direct services to this population on the streets, guiding them through the processes of obtaining vital documents, applying to public benefits, connecting to medical and mental health care, securing housing, and stabilizing in a life off of the streets. Per data yielded from the survey and through the application of the program evaluation inquiries outlined above, the provision of neighborhood-based street outreach has been determined to most directly address the stated and observed needs of the surveyed unhoused population in the FQMD within the most relatively low-cost, effective, and efficient model. The ways in which this model satisfies these considerations are outlined below.

Bring Services Where People Are

Neighborhood-based street outreach is an appropriate model for serving the French Quarter area unhoused population in large part because it brings services where people are, which was a common request by survey respondents and is a need evidenced by the many barriers respondents reported they have encountered accessing and obtaining services in the city's existing drop-in centers. Street outreach cuts out significant barriers to accessing services because the services are mobile throughout a neighborhood - outreach workers can easily carry tablets and paperwork on their person and effectively complete income, Medicaid, food stamps, and housing applications, order vital documents, call family members, and coordinate medical and mental health care all from a backpack.

Cost Effective Service Delivery

This model of bringing services where people are also represents a much lower cost of service delivery compared to a significant capacity increase versus traditional drop-in models of service provision. Currently, only a few case managers are available for walk-in housing assistance services across the entire city (3 at the Community Resource and Referral Center and 2 at the Rebuild Center). Thus, even one outreach worker represents a 20% increase to this capacity for services (which individuals already report difficulty in accessing), without the added costs of significant office space or the time and energy costs

of unhoused individuals themselves having to find, travel to, and wait for assistance at traditional drop-in centers. Five other outreach workers currently work for Unity of Greater New Orleans and are responsible for serving vulnerable individuals across the Greater New Orleans Metropolitan area, meaning they must give all locations with reports of unhoused individuals attention and cannot regularly or solely focus on serving any specific neighborhood.

Reaching the "Hard to Reach"

Street outreach is a particularly powerful model in part because it also uniquely reaches a population who can be hesitant or unable to reach services in a traditional setting, whether that is due to mobility, mental health, or cognitive disabilities that make access difficult, or due to experiences of long-term marginalization and trauma from compounded adverse life experiences (e.g., domestic violence, incarceration, foster care) that make trust building difficult and traditional service sites feel intimidating. Street outreach workers meet unhoused individuals on sidewalks and in parks and lead their approaches with tactics like coffee and conversation, not in offices where prevailing policies often dictate that case management relationships must start with paperwork. Street outreach workers who integrate themselves into the neighborhood they serve often find success in serving individuals who have otherwise not sought out or refused other services and offers of aid. Often, an entire community of unhoused people can come to trust an outreach worker who is consistently present, and some more engaged members of that community can encourage more reluctant members of the community to seek services in a way that cannot be replicated by people outside of the community. Given the many barriers to services identified by individuals living outside in the French Quarter, and the 17 total instances in which potential respondents who reasonably appeared to be living outside declined to participate in the survey, such a low-barrier, consistently-present model of service provision that reaches and builds daily trust with those who are often hardest to serve and/or most hesitant to accept services is appropriate.

National Best-Practice Model

Hyperlocal street outreach is considered a best practice across the country and is utilized widely, including by other public benefit corporations and business improvement districts (BIDs) around the country (see, for example, the BID outreach teams in Washington, D.C.). Currently only one such position exists in New Orleans (in the Downtown Development District Area), where it is considered a successful intervention and the outreach worker there has housed 80+ individuals per year for the past 3+ years.

Proactive, not Reactive

Part of street outreach's effectiveness is that it provides proactive services, not simply reactive ones. By constantly canvassing a designated area, neighborhood-based street outreach workers can quickly connect newly arrived individuals to appropriate services and can assess and triage things like worsening health conditions, open wounds, individuals' openness to services, and interactions between unhoused individuals and other stakeholders before any of these phenomenon reach crisis levels, which then requires more expensive forms of intervention, such as police and emergency services involvement.

Visible Presence Attends to Stakeholder Concerns

Street outreach can also serve to satisfy stakeholders who desire to see, visibly, efforts made to address the concerns of those who are unhoused in their neighborhoods. Multiple interviewed FQMD stakeholders, including residents, business owners, and police officers, reported a desire to see service providers coming out to engage with individuals experiencing homelessness in the French Quarter. Some expressed frustration about other services seemingly not being sufficiently visible on the streets, which extended to both public safety and service provision. If an outreach worker is introduced to stakeholders at an existing forum where they can provide information about their protocols and goals as a service provider and is then consistently present and visibly working with unhoused individuals in the French Quarter, stakeholders can observe the efforts being made by the FQMD to address the needs of the neighborhood's unhoused population and those who are personally interested in being involved can have a specific individual with whom to connect about referring individuals in need. Multiple stakeholders frequently reported a desire to be helpful but uncertainty about how to do so beyond direct provision of food or clothing, and an outreach worker can help serve as a directory for matching such potential support to specific individuals' long-term needs.

Focus on Housing While Attending to Other Needs

Inherent to the effectiveness of the street outreach model is a dogged focus on housing and providing immediate services and service connections.⁵ As seen throughout the data set, it is primarily issues of access, not willingness to accept housing, that has kept unhoused individuals in the French Quarter area without service connections. Street outreach cuts through typical enrollment and appointment-based case management barriers and is direct with unhoused individuals about their interest in housing, beginning the housing process the moment that people indicate their interest, even when doing so means completing

⁵ https://www.usich.gov/resources/uploads/asset_library/Core-Components-of-Outreach-2019.pdf

paperwork while sitting on the sidewalk for two hours. As the housing process goes on (or while building sufficient rapport with an individual for them to trust the housing process), street outreach workers also connect individuals to wrap around services, like healthcare and income, both through referring all encountered individuals to appropriate services and through hands-on support of the most vulnerable individuals in an area who are on the outreach worker's focused caseload, such as bringing clients to appointments, speaking to other providers on the client's behalf, applying to benefits for the client, and serving as a hub for all of the client's legal, medical, housing, income, and mental health concerns.

Flexible Model for Flexible Response

Street outreach that is funded in partnership with public benefit corporations and BIDs is often uniquely successful because it is not funded with specific programmatic goals in mind, like applying to certain HUD-funded programs with a specific number of people each quarter, which is a significant portion of how the case management positions at both the Community Resource Referral Center and the Rebuild Center are currently funded. That work is certainly important, but it means that other work on behalf of clients, which could look like facilitating nursing home or group home placement, helping someone get home to their family in another state, or applying to disability benefits with someone so they can be eligible for certain low-income housing programs represent deviations from what the position is funded to do and thus cannot be afforded serious time. In contrast, in neighborhood-based street outreach funded in partnership with BIDs or public benefit corporations, serving the unhoused individuals in a specific place is the only goal, and outreach workers can be flexible and creative about what the best pathway for each individual may look like.

Wide Entrypoint

Street outreach that is neighborhood-based has a wide entrypoint into services in that being unhoused in the area to which an outreach worker has been assigned is the only eligibility criteria for being able to work with that outreach worker. There are important programs that have more slim criteria, such as the Law Enforcement Assisted Diversion (LEAD) program, which provides those who are frequently arrested in the New Orleans Police Department's 8th District with case management services. However, as the data shows, half of individuals experiencing homelessness in the FQMD area report not interacting with the police at all during the past six months, and thus could not be served by the LEAD program, despite otherwise being eligible for housing and social services. Neighborhood based street outreach can partner with programs such as LEAD that have more slim criteria to locate, identify, and refer clients back and forth between programs.

Similarly, 4 of the 5 case management positions that provide housing assistance at the Rebuild Center and the Community Resource and Referral Center are designated and funded to work almost entirely with individuals who already have proof of being homeless for 12 months or more. While this would include many individuals in the FQMD area, it also excludes others who could be served by other interventions in the meantime.

Natural Caseload Turnover Allows for Steady Inflow

Inherent to street outreach case management is a natural client turnover - as an outreach worker helps one person stabilize in housing and hands them off to their long-term supportive housing case manager (or reconnects them with their family, or identifies a sponsor for them who will support them as they transition back to work, etc.), the outreach worker begins working with new unhoused individuals in their neighborhood of focus. In this way, a natural cycling occurs that allows even one outreach worker to serve many individuals over time as opposed to being locked into serving only 15-30 individuals at a time without any variance in that caseload for months or years at a time, as is the model of some longer-term case management programs. The outreach worker remains focused on the streets of their neighborhood, and follows individuals long enough to ensure their stability is achieved but also endeavors to quickly pull other sustainably supportive individuals and programs into the client's life.

Achieve Live Feedback Loop

Street outreach additionally serves to create a live feedback loop on what is happening among the unhoused population of an area. Currently, for instance, there is no way to compare the data yielded from this study to what the realities and needs of the unhoused population in the French Quarter were one year or five years ago, because that data does not exist. By being a constant presence on the streets, street outreach workers create live feedback about the population in the area in which they are working and can relay current information about services to clients as well as current information about their client population to other service providers and other parties working in the neighborhood, whether that be parties like FQMD staff, police, or others. In this way, street outreach workers can also highlight systemic obstacles and gaps that clients are recurrently encountering and, in the case of the French Quarter, work together with the FQMD itself over time to determine what local advocacy or strategy is needed to address those obstacles and gaps.

Considerations for Street Outreach Implementation

To ensure that street outreach could work effectively in the FQMD area, the following considerations and recommendations for implementation are also included here:

- The street outreach worker should be contracted through or otherwise integrated into an existing homelessness social services agency. This is because the housing system in New Orleans relies heavily both on coordination with Unity of Greater New Orleans, who works through these agencies, and on access to the electronic Homeless Management Information System (HMIS), a database through which client information is stored and service coordination occurs, but access to which is only granted to homeless services nonprofits. Additionally, placement of a street outreach worker into an existing homelessness social services agency allows for reliance on existing services within that agency, such as: referral access to other programs; utilization of agency resources like transport vans, bus passes, or donated clothing; and utilization of staff capacity that is afforded to nonprofits through social work interns and volunteers.
- The position should be funded through a flexible enough stream that the outreach worker can focus on the neighborhood and its unhoused residents' needs, not on satisfying quotas of a specific type of referral.
- The position should not be involved with the policing of clients, even if the outreach worker in the position remains in close communication with public safety and police officers in the area to identify vulnerable unhoused individuals. It is not possible for a street outreach worker to therapeutically serve/build trusting rapport with unhoused individuals and simultaneously police those same individuals, and thus the outreach worker should not be expected to move or otherwise police individuals at any time.
- Data shows that while a significant population of individuals sleep and spend most of their time in the FQMD area itself, there is also inflow into the area from individuals who sleep elsewhere in the French Quarter and the city. Depending on capacity and funding concerns, it is possible that a worker dedicated to the French Quarter could work in partnership to also serve individuals in other parts of the city, and thus be funded in partnership with organizations from those areas.

Service Recommendation Three: Collaborate for Co-Location of Services

The final recommendation for serving the unhoused population in the French Quarter is to collaborate for the provision services aimed at helping individuals experiencing homelessness meet their other basic needs (non case-management or housing access needs, which would be best served by a dedicated neighborhood outreach worker, per the immediately above second service recommendation) within the French Quarter itself. Doing so will also mitigate impact on public facilities, like restrooms, which are currently

overburdened trying to meet both the restroom needs of visitors as well as the full personal hygiene needs of unhoused individuals at the same time.

This does not have to involve the creation of new structures or programs, but could instead be accomplished with contract relationships with existing efforts of this kind in the city. The co-location of services in the French Quarter itself was stated repeatedly as a need of those experiencing homelessness there and can likely be accomplished through creative service coordination.

Expanded Access to Bathroom Facilities

To mitigate both the distress and lack of dignity that lack of bathroom access causes for unhoused individuals as well as the frustration that (a) use of the outdoors as a public bathroom and (b) use of public bathrooms as full service personal hygiene locations cause for stakeholders and unhoused individuals alike, expansion of access to bathroom facilities should be considered. While concerns exist around the extra labor needed for management of existing bathroom facilities for longer hours or other facilities (like portalets) that could be newly placed in the French Quarter, many respondents reported their use of the outdoors to relieve themselves results from a lack of actual bathroom availability. In this way, the labor involved in managing longer hours at existing public bathrooms or additional facilities achieved through portalets, is standing in place of labor that would likely otherwise be expended by cleaning services and businesses to clean up human waste from the area.

The French Market Corporation is currently working on a study of architectural and non-homeless-facing offerings and programs with several consulting agencies whose work can be viewed here. The French Market public bathrooms were the most frequently cited as the primary location where individuals from the entire French Quarter use the restroom, and there are notably no other entirely public restrooms in the French Quarter for those who are unhoused, visitors, tourists, residents, or other stakeholders. It is likely that, long-term, public restroom expansion would best serve the needs of all those utilizing the French Quarter for business or personal reasons. In the meantime, however, contracting of portalet services or the expansion of hours of existing public restrooms are options that offer increased dignity and access for unhoused individuals and stand to alleviate waste and trash removal from non-restroom areas, like sidewalks.

Access to Hygiene, Laundry, and Shower Services

Similarly, there is a significant lack of access to hygiene, laundry, and shower services for unhoused individuals in the French Quarter. However, structures exist within the French Quarter itself and in New Orleans as a whole for the provision of these services that could likely be expanded through partnership with existing entities.

Namely, both the Vieux Carre Baptist Church (located at 711 Dauphine Street) and the Kula Bus (mobile converted school bus operated by the New Orleans group "Santosha Village") offer shower and laundry services to individuals experiencing homelessness one day per week and their services could likely be supported for expansion.

The Vieux Carre Baptist Church operates a shower, laundry, and clothing provision service every Friday that is well attended and was mentioned by many respondents as useful and frequently utilized. The surveyor team spoke with the Vieux Carre Baptist Church who expressed interest in expanding their services, whether that be through the provision of their space for outreach worker office space or the consideration of providing increased hygiene services with assistance coordinating volunteers and donations.

No individuals in the sample reported using the Kula bus (likely due to distance - it offers its services every Sunday under the US-90 Expressway bridge at Calliope and Oretha Castle Haley Streets), but it or a similar service could be a good option for expanding this kind of service access in the French Quarter, if the bus were able to be contracted for service even one or two days out of the month, for instance, to provide shower and laundry services to more individuals. Currently it operates on an entirely volunteer basis, but the provision of more volunteers, supplies, or funding could be offered to this service or the development of a similar one. The mobile shower unit model is used in many other cities in the country and was actually named by a business owner stakeholder as something positive they had seen done in other cities where they did business. Such a service could be located in the service parking lot between Gov.Nicholls and Barracks Street adjacent to the street car tracks (within the FMC area), as this is a discrete location not as frequently trafficked by other visitors to the French Quarter, which would offer utilizers of the service additional privacy (though no portion of that shower service involves public bathing - it occurs in a contained, private space).

Recommendations for Co-Locating and Coordinating Services

To ensure that such co-location and/or coordination of services could work effectively in the French Quarter, the following recommendations for implementation are also included here:

Respondents report that they have been frustrated by confusing rules or
misadvertised times of services at other locations, so starting such programs small
enough that the advertised hours can be trusted and reliable (not frequently
canceled or interrupted) is key to have the service be trusted by and useful to
unhoused individuals in the French Quarter.

Recommendations for Utilizing Existing Structures to Meet Needs

Structural Recommendation One: Changes for Public Safety and Police

Given the frequency with which police and public safety forces and unhoused individuals both report interacting with each other, consideration should be given both to improving these interactions' effectiveness as well as to the possibility to divert some of these interactions to more appropriate responding parties, such as outreach workers.

Better Reporting and Tracking Methods

First among changes possible for public safety and police working in the French Quarter is the need for improved methods of tracking how often they are interacting with individuals experiencing homelessness, what the cause of such interactions are, and what the outcomes of such interactions are. Aggregated information of this type was not available due to some gaps in incident tracking prior to the survey period, but could be useful in multiple ways:

- Such information can be leveraged to advocate for the funding of outreach workers if it is possible to state how often police and public safety are tending to needs of unhoused individuals quality of life police officers estimated these interactions are occurring at least daily for all police in the area and individuals involved with public safety provision in the French Quarter area estimated calls related to homelessness may constitute as much as 70% or more of a public safety officer's workload.
- Such information can also be used to determine which individuals are most in need of more targeted outreach services.
- Additionally, such information can be useful in providing further training to police and public safety officers around interactions that more frequently result in citation, escalation, or arrest versus interactions that generally result in positive outcomes.

Materials and Training

While meetings with quality of life police officers in the French Quarter indicated these officers desire to be helpful to individuals who are unhoused and that some of them know the information relevant to unhoused individuals accessing basic services, they were generally unaware of housing processes, methods for accessing treatment, or even the

ways in which police officers could assist in the housing process by documenting/certifying the homelessness of individuals whom they repeatedly encounter sleeping outside, which could greatly aid many unhoused individuals in accessing resources. Additional training and provision of resource materials to such officers could be useful in updating officers on best policies and opportunities for aid.

Partner with Outreach

While police and public security officers should be trained on opportunities to assist and best practices for engaging individuals who are experiencing homelessness, the expectation to be case managers should not be placed onto police officers. Instead, police should be equipped with the ability to partner with outreach workers to provide needed social services. The other job functions required of police do not allow sufficient time for true case management. Models that either make police officers themselves case managers or that rely on police to be the sole or primary referral and transport source for connecting individuals to services raise several concerns:

- Police officers currently do not have infrastructure to either offer themselves or regularly transport individuals to services, and those services themselves (drop-in locations such as The Rebuild Center and the Community Resource and Referral Center) are dually limited in their ability to meet individuals' needs with one on one attention: (1) they have limited capacity to see individual clients at specific times due to small staff sizes and (2) their process for assisting individuals with long-term service provision usually involves multiple meetings spread out over weeks or months, and given that so much of the respondent population cited significant difficulty in reaching these services, even a one-time transport there would have limited to no ability to move someone forward in the housing process given respondents' limited abilities to independently return to such sites over and over.
- A significant number of respondents cited negative experiences with the police (and some resulting experiences of incarceration) that stick with them and negatively shape their perceptions of police in the French Quarter, even if those incidents happened years prior with an entirely different police force. Given that more than 80% of the French Quarter unhoused population reports having had some involvement in the justice system at some point in their life, such experiences may be common among the respondent population and position police as a historically adversarial force for some respondents, regardless of how polite or caring specific police officers within the French Quarter attempt to be.
- Because the largest segment of respondents reported never interacting with police nor public safety, any reliance on a model that centers police and other first

responders as the primary entryway into services for unhoused individuals leaves as much as 50% of the unhoused population in the French Quarter without service access.

Improved Communication about Laws and Policies

The final way in which police and public safety could modify their operations within the French Quarter for improved interactions with unhoused individuals is through improved communication about laws and policies. Respondents who commented on their interactions with police officers asking them to relocate from one area to another included a mixture of positive and negative feedback, though several respondents took time to note that officers were cordial and respectful in their explanations of why moving was necessary.

However, in general, respondents gave mixed responses to whether or not camping was allowed in public spaces and some respondents reported being told to repeatedly move throughout the day despite feeling they were in a public place and not blocking any access to any business or residence. This caused some respondents to feel frustrated by a series of interactions that seemed more based on their appearance as individuals experiencing homelessness than on their violation of any specific policy. Internal clarity should be reached about when such interactions or requests to move are actually needed and these clarified policies should be communicated to individuals experiencing homelessness. Policies should be explained in simple terms and enforced consistently by different officers.

Structural Recommendation Two: Utilize Partnerships within the French Quarter

Notable opportunity exists for partnerships within the French Quarter aimed at meeting needs of unhoused individuals. Most importantly, the French Market Corporation (FMC) and the FQMD face significant opportunity to embark on many of these endeavors together - whether that be pooling funding for the provision of services like a street outreach specialist within the French Quarter or jointly seeking to offer educational opportunities for stakeholders who want to learn more about and become involved in meeting the needs of unhoused individuals.

Additionally, several business owners and residents who were interviewed as stakeholders reported not only a desire to aid unhoused individuals but also histories of employing, formally or informally, unhoused individuals over the years. Most often, having done so was a mutually beneficial arrangement that went on without issue, and several surveyed unhoused individuals pointed to their jobs and labor in the French Quarter as points of pride, purpose, and connection. If an outreach worker was employed in the French Quarter,

they could identify employers willing to accept referrals of unhoused individuals looking for work. Similarly, businesses willing to support the outreach program with supplies or other services could be identified both to aid functional capacity and to foster a sense of involvement in issues facing unhoused individuals among the business community.

Finally, many respondents identified music and art as factors that draw them to the French Quarter area, which is the case for many individuals who visit the French Quarter every year. Some of these individuals already reported selling their art or playing music to make money. While this would be a long-term goal more aimed at integration than the addressing of survival needs, the French Quarter could identify opportunities for such individuals to more formally sell or showcase their work. As detailed in the parallel FMC report, such opportunities may exist within the French Market, by creating a table for currently or formerly unhoused individuals to sell their work, which provides work and income opportunities for the unhoused as well as meaningful connection opportunities for visitors who may otherwise hold negative stereotypes or beliefs about the unhoused community.

Recommendations for Advocating for the Population

Advocacy Recommendation One: Educate and Involve Stakeholders

Because no formal effort has been undertaken to gauge opinions of all French Quarter stakeholders on issues related to homelessness, it is not currently possible to say where the majority opinion rests or what beliefs all resident or business owner stakeholders may have about individuals who are unhoused in the French Quarter. However, it is clear that not much is known in general about this population (with no one being certain even how many people regularly slept in the area prior to the study, with guesses from interviewed stakeholders ranging from 30 to 150), and thus sharing of factual data could shed light on general truths about the French Quarter unhoused population, dispel myths and correct stereotypes about the unhoused population, as well as, in some cases, likely foster empathy for the unhoused community and the realities they face.

Make Report Available to Stakeholders

Making this report available to stakeholders may increase levels of understanding significantly, which may, over time, have continued impacts on how French Quarter stakeholders speak about and seek to address homelessness if they understand the significant barriers these individuals face in accessing services.

Sharing this report may also correct some stereotypes that were found to be common among interviewed resident and business owner stakeholders. For instance, several mentioned beliefs that most unhoused individuals in the area were choosing the French Quarter area specifically because of the availability of alcohol. However, alcohol was mentioned as a draw to the area a total of only 7 times in survey responses to the question about draws to come to or remain in the French Quarter by 125 respondents. Much more present were mentions of connections to family, work, safety, music and arts, and community, which are likely more sympathizable narratives that could be shared with stakeholders.

Provide Resource Guides to Interested Stakeholders

Meetings with French Quarter stakeholders, residents, and business owners emphasized the high rates of interaction between unhoused individuals and these various stakeholders that already exist, many of which are mutually beneficial and some of which are difficult.

However, all such interviewed stakeholders stated their desires to be helpful to individuals experiencing homelessness and/or to see them connected to meaningful services. Many had stories of hiring, giving clothing and blankets to, feeding, and being generally concerned for individuals they saw experiencing homelessness in the area. Thus, materials (easy to read and use maps and flyers about available local resources, which can exist both on paper and through regularly-updated live links accessed through QR codes) should be available to those who frequently interact with unhoused individuals, such as the French Quarter Task Force and other interested stakeholders, for dissemination to the unhoused individuals in the area.

It is important to note that resources can change frequently and most stakeholders are not case managers, so it warrants emphasizing that such resources should be updated regularly (likely by the neighborhood street outreach worker) so as not to misdirect individuals in need. Stakeholders wanting to utilize such a resource guide, regardless of its format, should be trained prior to the provision of such resources to ensure they know what types of referrals they can make themselves ("pointing people in the right direction") versus what types of assistance they may need to involve a street outreach worker who can help the person directly. Additionally, such training sessions provide the opportunity for housed French Quarter stakeholders (business owners, residents, police and public safety officials, FQMD staff, etc.) to build interest in and receive education about the issues experienced by unhoused individuals who are living in the FQMD.

Consider Long-Term Opportunities for Visitor and Tourist Education

Several interviewed stakeholders noted that they did not know if the presence of unhoused individuals actually affected businesses or visitor rates in the French Quarter (or was just perceived to do so), but they were certain that the presence of unhoused individuals was something frequently commented on by tourists from less urban areas and that it affected perceptions of the area by those tourists.

Long-term, opportunities for visitor and tourist engagement should be considered to address those perceptions. These could include, as mentioned above and as detailed further in the parallel report to the FMC, the integration of unhoused individuals into spaces already celebrated for their cultural offerings, such as the inclusion of products created by unhoused individuals in artist vendor stall offerings at the French Market.

Other programs that have been used nationally for such ventures also include the utilization of QR-code opportunities to learn about and/or donate to local programs either posted or provided on paper where tourists may encounter or inquire about individuals who are unhoused. This does not discourage direct, in-person giving or interactions between visitors and unhoused individuals. It does provide an opportunity for those who would be

uncomfortable to have such personal interactions to learn about and/or contribute to meeting the needs of the unhoused. Such a system could be electronically opened to a webpage that provides both basic educational information about the area's unhoused population as well as the opportunity to donate. Any funds collected from such a measure could be directed specifically to supporting the French Quarter neighborhood outreach worker's efforts (covering the costs of supplies, replacing client vital documents, application fees, etc.) to help sustain that program and ensure donors that their dollars would stay in the French Quarter.

Advocacy Recommendation Two: Use Platform to Share System Barriers and Solutions in City and State Arenas

The French Quarter as a group of stakeholders has potentially significant input into arenas concerning social service and housing provision, especially if or when the FQMD itself endeavors to become involved in service provision to the unhoused population. From this survey alone, it is clear that respondents are struggling to access spaces in which they can ask for and apply to long term services like housing. Once the FQMD endeavors to participate in connecting its unhoused population to those spaces where services can be accessed, it will have an additional platform and data to consider larger, systemic recommendations. For instance, nearly one-fourth of respondents are eligible for senior housing programs based solely on their age, but given that none of those individuals reported having applied to live in such a setting, it is not currently possible to say from this data alone the extent to which such a service is sufficiently available (or not) to this population. Or, regarding needed mental health or substance abuse services, once the FQMD has endeavored to actually connect its unhoused residents to these services, it can use its platform to provide feedback about the sufficient availability or operating procedures of such services in other arenas, such as among stakeholders, with city council, or with other coordinating city agencies.

Advocacy Recommendation Three: Treat "Move-Along" Policies with Caution

In conversations with stakeholders prior to survey implementation and data collection, the idea of having unhoused individuals regularly "moved along" from the French Quarter, either into other neighborhoods or forcibly into shelter options that are being expanded by the city, was brought up several times.

Such policies should be treated with caution. As a primary coordinator of enforcement bodies in the area (police and public safety), the FQMD should consider carefully its involvement in and its advocacy around such suggested policies for several reasons:

- The data indicates many individuals have deep personal, familial, and cultural connections to the French Quarter and are not simply "hanging around" for easy access to alcohol or tourist sympathy. Efforts to forcibly move these individuals from the area into another represent a discounting of these important ties and are likely to be ineffective long term, given the decades that many of these individuals have spent in the French Quarter. While individuals may come back even once connected to services, it is their right to spend time in public spaces and enjoy the offerings of the French Quarter that draw other visitors there as well.
- Even when additional shelter beds are available (as the city is soon to expand its Low Barrier Shelter at 1530 Gravier Street by as many as 250 additional beds, though no official opening date has yet been set), it is not feasible nor advisable to universally force unhoused individuals into such settings, which was mentioned as a potential policy by several stakeholders.⁶ Almost 60% of respondents stated they would willingly accept these beds when they became available, but 32.25% stated they would not be interested, and 8.60% stated they were uncertain. Given that over 85% of those who were not interested in such a shelter setting were still interested in housing, forcing them into shelter instead of providing street outreach case management represents a much more expensive means of serving individuals while they are engaged in the housing application process. The imagination of such a policy begs a series of questions and concerns about how such a policy could be enforced ethically and legally:
 - Would all individuals sitting in a public place like Latrobe Park be subject to questioning about their sleeping whereabouts? What profiling occurs?
 - Or, would enforcement only occur in the nighttime or morning hours?
 - Would enforcement happen among all those sleeping outside or only among those who were sleeping in locations that caused complaints?
 - What would the consequence for noncompliance be? Any subjection of those uninterested in shelter settings to legal proceedings or incarceration represents a punishment of homelessness and, in the case of incarceration, a huge city expense, as jail beds are a very expensive form of housing.⁷
 - Some respondents in the sample reported having been barred from shelters for past behaviors (but all respondents in that group were still interested in

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⁶ November 2021 Update: Total Projected Beds will go from 100 to 346, a 246 bed increase, with initial move-ins of new shelter guests planned for as soon as mid-December 2021.

https://www.vera.org/downloads/publications/past-due-costs-consequences-charging-for-justice-new-orleans-technical-report.pdf

housing). If individuals are forced into a shelter setting but later barred and encountered again sleeping outside, are they then cited or incarcerated for their inability to return to the shelter setting required by the policy? Such a practice would be particularly troubling given that most offenses for which individuals are barred from such facilities are tied to symptoms of mental illnesses or trauma.

- How would such a level of increased enforcement be staffed, given that about half of respondents reported not interacting with the police at all currently and that there are currently existing shortages in city police staffing?
- Given the consistent near-100% occupancy rate of this shelter currently and the size of the unhoused population that also exists in other parts of the city who may want shelter access, such a policy would likely not always be able to guarantee shelter bed availability even once the shelter has expanded, meaning its ability to be enforced would be sporadic, if its enforcement is enabled by the current availability of open shelter beds at any given time.

In Conclusion: Keep Listening

The situations described by respondents of this survey were often dire, not only in terms of lifelong histories of homelessness and other adverse life experiences, but also in day to day, current realities of contending with survival without housing, from finding a safe place to use the restroom to managing major disabling medical conditions without the ability to access formal treatment.

At the same time, the individuals surveyed were largely willing to share, grateful to be heard, and hopeful for effective changes that could serve them and their community and, in some cases, save their lives. It was clear that many people not only desire services for themselves but also desire to see changes in how individuals who are homeless can access services in general and are willing to engage on this topic and many others, from changing cultures in the French Quarter over the past several decades to the quality of music at local venues.

Efforts should be made to see and treat individuals living outside in the French Quarter as stakeholders and residents of the FQMD as well, especially when conversations include policies and programs affecting them. As programs develop and more personal relationships with unhoused individuals in the FQMD are formed, conversations should continue and should be encouraged and pursued at all levels - from formal data collection to the incorporation of individuals with lived experiences of homelessness in the FQMD into relevant forums for decision making, such as stakeholder meetings.