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# Fitting Stories: Outreach Worker Strategies for Housing Homeless Clients

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## Abstract

Social service outreach workers serving homeless populations exemplify Michael Lipsky's concept of street-level bureaucrats who exert considerable discretionary power in performance of their roles. In their efforts to qualify their homeless clients for housing, outreach workers create "fitting stories" that present their clients as qualified for support within the social service contexts that provide housing services. We describe outreach workers' creation and negotiation of fitting stories with two audiences: homeless clients and institutional gatekeepers. Outreach workers respond to barriers to qualifying their clients for housing by creatively finding ways to manipulate clients' biographical narratives and evidence to support those narratives in ways that "fit" their clients to agency criteria for housing services. In the process, outreach workers at times play loosely with the letter of the law in attempts to meet the spirit of the law in the service of their clients and agency expectations for service delivery.

## Keywords

homelessness, street-level bureaucracy, social policy, narrative editing

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## Introduction

Social service workers typically begin their careers with a motivation to make a difference in the lives of vulnerable individuals and groups. Once in the field as practitioners, they often face challenges related to members of the marginalized populations they seek to serve on the one hand and bureaucratic agency directives and constraints on the other. Michael Lipsky has examined many of these challenges in *Street-Level Bureaucracy: Dilemmas of the Individuals in the Public Services* (1980, 2010). He argues that street-level public service employees face practical challenges of aligning their experiences with clients to the mandates of legislative policy and organizational guidelines. Lipsky's insightful analysis focuses primarily on the ways in which public service workers invoke discretionary power and routinize interactions with clients in order to ration relatively scarce resources within organizational constraints.

As Evelyn Brodkin has observed, Lipsky's analysis of street-level bureaucracy challenges what she terms the "compliance model of street-level bureaucracy" (2012, 941). Brodkin argues that Lipsky advocates a view that embraces recognition of street-level bureaucrats' competency within, and especially beyond, explicit policy. Put simply, Lipsky invites empirical investigation of how ground-level social service workers adapt to often ambiguous or complicated bureaucratic social service policies. Brodkin elaborates that

by investigating why and how bureaucratic practices develop in specific organizational contexts, street-level analysis can inform the search for improved accountability in policy delivery. It has the distinct advantage of moving analysis beyond the "command and control" assumptions of the compliance model to take empirical account of factors that influence routine practice on the ground. (2008, 323)

Utilizing this approach, we describe the experiences of street-level outreach workers involved in providing services to the homeless. We analyze the ways in which street outreach workers view homeless individuals' problems and the narrative and documentary strategies they use to optimize services to the homeless within the contexts of organizational service criteria and directives. Specifically, we address the challenges and strategies used by outreach workers to create what we term "fitting stories" as "the organizational production of types of selves" (Loseke and Cavendish 2001, 348) worthy of support within the social service contexts that provide services and resources for the homeless.

## Methods

This article draws upon two sets of data. One set comes from the first author's six years of experience (from 2002 to 2007) as a street outreach worker with

thirty to seventy homeless clients at a time in two large metropolitan areas, one in the midwest and the other in the southwest United States. The street outreach worker positions held by the first author during this time involved mediating between homeless individuals and available homeless services, in particular housing services reserved for clients exhibiting “severe mental illness.” Each of the outreach positions were considered to be aggressive street outreach, meaning that funding stipulated aggressively pursuing homeless individuals on the streets, under bridges, in parks, and abandoned buildings. The researcher held multiple outreach worker/supervisor positions that, depending on the funding source, targeted specific types of homeless groups, such as homeless youth or adults with mental illness. Teresa Gowan (2010) calls the separation among homeless services an “archipelago” of services because the services are separated like islands, each providing specific services only to a particular category or type of homeless person based on their funding sources. Street outreach workers transport willing homeless individuals from the streets to local shelters and services daily in an effort to match homeless individuals with resources distributed across the service archipelago. As a street outreach worker, the first author’s responsibilities included assessing the appropriateness of clients for referral, negotiating appropriate actions in pursuit of housing or other resources, and optimizing the number of successful services, including direct services and referral to services at other agencies. The experiences the first author had during the course of employment as an outreach worker sensitized him to several types of discretionary activities that outreach workers practice in order to achieve their goals with homeless clients. This sensitivity, guided by doctoral-level readings and coursework, provided a backdrop for designing the subsequent—and currently ongoing—dissertation research. As the current research (described below) proceeds, the first author has found himself recounting experiences from his past outreach employment that parallel and/or contrast with new observations and data. When such recollections occur during the course of current data collection and analysis, the researcher has approached his recall of past events much as he would in an interview with a key informant, seeking to accurately and in detail describe in writing the past activities in order to use the recollections as supplemental data.

The current data collection involves ongoing ethnographic field research with outreach workers serving the homeless in a large urban center in the western United States where homelessness is perceived by local officials and the public as a major social problem. This research entails observation of outreach workers’ activities at three levels: working directly with their clients, work with their peers and superiors at their agencies (and other agencies they interface with), and “extracurricular activities,” including personal support for the homeless and activism/advocacy beyond their work roles.

The data for this study include field notes based on direct observation of outreach workers' interactions with the homeless and with agency coworkers and interviews with outreach workers and leaders of agencies providing services to the city's homeless population. In the current study, the first author has spent 173 hours in the field, collecting observational and interview data from forty-five social service workers as they have interacted with sixty-nine homeless clients and eleven other agency personnel (not including attendance at large staff meetings) and pursued a range of activities directed toward evaluating clients and facilitating what they view as appropriate services. The forty-five social service workers observed and interviewed in this study include twenty-six women and nineteen men, ranging in age from twenty-two to sixty-eight. Their length of time employed in social service work with the homeless varies from less than one month to twenty-six years. Field notes were written by the first author shortly after returning from the field and subsequently reviewed by the second author. The two authors have met on a weekly basis to discuss ongoing fieldwork, identify emerging topics of interest, establish coding categories, and determine future fieldwork directions.

Based on field notes, interview data, and the first author's recounting of his own past outreach work, this article examines one kind of outreach workers' responses to bureaucratic challenges they face in securing housing for their homeless clients. Specifically, we focus here on what we term "fitting stories," or narratives and accompanying documentary evidence that present homeless clients as fitting existing criteria for service eligibility. We use the term *fitting stories* as a double entendre, or a term with a double meaning. On the one hand fitting stories adhere to a compliance model of street-level bureaucracy in presenting acceptable forms of "objective evidence" that clients fit programmatic criteria. On the other hand, fitting stories involve active and creative crafting of stories—of fitting some pieces of busy and often chaotic lives into stories that sell well with agency gatekeepers and open the path for resources, especially in this case, housing for a homeless person. The concept of fitting stories emerged as a key theme during the course of the currently ongoing fieldwork and analysis. Once we identified the operational construct of fitting stories as a generic social process (Prus 1987) invoked in these social service settings, we pursued additional examples more explicitly through (1) reanalysis of previously collected data to identify cases that were not recognized prior to the analytic emergence of this key theme and (2) more conscious efforts to pursue and identify examples in the course of ongoing research. This methodological strategy has been referred to by Patton as "operational construct sampling" in which "one samples for study real-world examples (i.e., operational examples) of

the constructs in which one is interested” (2001, 238–39). “Sampling on the basis of emerging concepts,” as advocated by Strauss and Corbin, aims to “explore the dimensional range or varied conditions along which the properties of the concept vary” (1998, 73).

## Findings

Like other street-level bureaucrats discussed in the social service literature, homeless outreach workers face bureaucratic challenges at two levels. At one level, their work involves negotiation with clients who present a range of needs and attitudes toward the services that outreach workers are able to provide. At another level, their work focuses on determining whether their clients meet the criteria for support provided by their organization or other social service organizations—and advocating for clients who they believe do meet the criteria. We present our analysis in two sections. First, we examine outreach workers’ endeavors to create fitting stories with homeless clients. We then turn to outreach workers’ efforts to craft fitting stories in ways that are responsive to the criteria and expectations of intra- and interorganizational peers and superiors who serve as gatekeepers for client services.

### *Fitting Stories with Homeless Clients*

Homeless outreach workers are in a position that requires them to negotiate and mediate between a client’s records, biographical situations, and personal identities, on the one hand, and available services, on the other (Lyon-Callo 2000). Some homeless individuals clearly fit housing service criteria and are amenable to outreach workers’ guidance through the application process. In these cases, acceptance into housing may be relatively straightforward once clients are identified, as illustrated in the following example:

Cathy<sup>1</sup> had been observed by the outreach team to be displaying symptoms of psychosis, along with some mood disorder symptoms. After two weeks at the emergency shelter, Cathy was transported by Norma to an appointment with a diagnostician. Cathy was formally diagnosed with schizoaffective disorder. After Cathy waited for another week and a half at the emergency shelter, Norma was able to make arrangements for Cathy to meet a transitional shelter intake worker. As we walked out of the emergency shelter that day, Norma notified Cathy of the good news. Cathy repeatedly said, “Thank you! Thank you!” With all her paperwork, Cathy was accepted into transitional housing the next day to an all-women’s dormitory setting where she was monitored and was assigned a case manager. She was allowed access to her own place instead of the crowded floor of the emergency shelter.

Cathy's case represents the official ideal for identifying seriously mentally ill (SMI) homeless individuals, evaluating them, and providing them with housing services. Although it took nearly a month to move Cathy through the diagnostic and housing placement pipeline, she was easily identified within a service-worthy category and was compliant with the outreach worker's guidance throughout the process.

Often, however, for a variety of reasons it can be a challenge to get clients to compliantly fit into existing service-worthy categories. At times, homeless clients value other needs (e.g., being able to spend nights with a romantic partner) more than what they can get from services that outreach workers offer. They may also be unwilling to present themselves as victimized or vulnerable, especially if a mental illness diagnosis or other stigmatized identity is involved (Lyon-Calio 2000). Indeed, the majority of homeless individuals resisted being labeled as mentally ill in order to receive housing services. As other scholars (e.g., Snow and Anderson 1987, 1993; A. B. Miller and Keys 2001; Hoffman and Coffey 2008) have noted, even though they face material deprivation and socially degrading living conditions, most homeless individuals challenge their stigmatization, seeking to carve out an identity that provides some semblance of dignity and self-worth.

While some homeless individuals were willing to accept less stigmatized mental illness diagnoses (e.g., disorders such as ADHD and depression), they were unwilling to accept serious mental illness diagnoses that qualified them for housing. A case in point is provided in the first author's field notes from his time as an outreach worker:

I was approached on my way to my car by a male in his early thirties whom I had not seen before. He said, "Hey I was wondering if you could help me." I stopped to say hello and hear him out. Most of the time, I found that if I had patience to listen, homeless individuals had a lot to say and were appreciative of my taking time for them. I used this strategy to foster their willingness to follow through with their case plan. However, this individual made some comments that took me by surprise.

He said, "I need a place to stay. I have been diagnosed with ADHD [Attention Deficit Hyperactivity Disorder] and ADD [Attention Deficit Disorder, a former version of the same diagnosis] and anger issues, man. Does that count? Can I get anything for that?"

I explained to him that those disorders did not qualify for services.

In contrast to this man's willingness to identify as ADD and depressed, virtually no homeless individuals seek out housing based on self-identification in service-eligible categories of SMI. While some, like Cathy above, do

not resist such classification and services, many homeless clients either actively resist identification as SMI or present themselves to outreach workers in ways that complicate documenting an SMI diagnosis that would make them eligible for services. One common problem is client drug abuse that can be used by mental health diagnosticians as an alternative explanation for mental illness symptoms. As one outreach worker explained when discussing a client who was rejected for SMI housing,

Here's the main problem, the intake form for mental health housing asks if the person has used, asks when the last time they used is, and if they say—really anything at all about drug use—then they [mental health intake workers] use that as evidence that the symptoms are due to the substance and not his actual SMI. So he loses his housing opportunities.

While outreach workers frequently see drug abuse as just another symptom of serious mental illness rather than the underlying cause of other symptoms, they have few resources for effectively shifting the narrative framing of drug abuse to an SMI frame. However, they are more successful in responding to other challenges in ways that enable effective fitting stories. One such challenge involves sifting through clients' rambling accounts of their problems in intake interviews and other staff-client interactions in order to focus attention on the criteria that facilitate qualifying clients for housing. Drawing on Gubrium and Holstein (1998), Amir Marvasti has referred to such strategies as forms of "narrative editing" that direct and focus "organizationally useful accounts of homelessness" (2002, 615). Narrative editing can be particularly useful for outreach workers seeking to present their clients as qualified for housing programs. Seasoned outreach workers are well versed in the criteria that qualify—and disqualify—clients for various services. Not only is there a particular lingo used in agencies, but definitions of some key criteria change as policies and programs are instituted or revised. For instance, the definition of "chronic homelessness" used for assessing housing eligibility and criteria for the Rapid Re-housing program have changed significantly over time. As one outreach worker tentatively explained this criterion in relation to Rapid Re-housing program eligibility for SMI and disabled clients,

Currently I think they have to be homeless for at least one hundred and fifty days before they can become eligible for Rapid Re-housing. First it was thirty days when it started, then it was ninety days, and now I think it is one hundred and fifty days before they're eligible.

In addition to length of time on the streets, even some very temporary housing could be considered disqualifying for services, including occasionally staying at a motel, being "housed" in jail, or in some cases even staying

in some types of homeless shelters. While outreach workers maintained a relatively good grasp of these changing criteria, their clients often did not—and as a result at times reported things that made them ineligible for services they desperately needed. In response to this challenge, outreach workers engaged in what Marvasti (2002) has referred to as “narrative editing” of homeless clients’ biographical accounts in intake interviews. In what Marvasti terms “collaborative editing,” homeless social service workers focus conversations with homeless clients and elicit information that facilitates qualifying them for services. At times this collaborative editing involves thinly veiled coaching not just on what to say, but what not to say. As one outreach worker recounted,

I had to tell a guy the other day: I need you to tell me you are staying in your truck. Because I knew he was staying in a motel room a few nights out of the week—but that would make him ineligible for housing! He didn’t get it at first, so I repeated [gritting through his teeth at a slower pace], “Just tell me where your truck is parked so I can mark that as where you sleep at night on this form.” He still didn’t get it so I told him [even more sternly], “You’ve been sleeping in your truck!” [laughing] He finally got it and I got him into housing.

At other times, outreach workers simply informed clients that they were drawing service-supportive conclusions from clients’ statements, as in a conversational interaction during an interview in which a female outreach worker, Chloe, filled out an agency intake form. As she worked her way through the form, at one point Chloe asked her client, “Have you ever had any brain damage or head injury?” The client responded, “I got smashed in the face real bad before. I had to get plastic surgery a few times on my nose.” Aware that claiming brain damage would increase her client’s vulnerability rating, and thus his chances for housing, Chloe responded to this information by telling him, “Well, I’m marking that as ‘yes’ because you can’t get your face smashed in without something happening to your brain.”

In each of the foregoing examples, outreach workers fudged their paperwork in order to fit their clients to bureaucratic criteria that defined qualifications for housing services. In contrast to a “compliance model” of street-level bureaucracy, these homeless outreach workers invoked discretionary actions in which they manipulated clients’ stories to fit the spirit of the law at the letter’s expense. As Chloe explained, “We have to bend to rules. Plain and simple, we have to.”

In short, the street-level bureaucrats observed in this research used their rule-bending and discretionary power in fitting clients’ stories to institutional criteria not to override agency goals, but to achieve them. As one outreach worker succinctly put it, “You know, if agencies are too stringent, then they

don't help many people. The kinds of services they offer suffer because not many people actually qualify for services." The street-level bureaucrat's discretionary power widens the net of service eligibility, thus serving both client and agency goals to maintain sustainability of available services.

### *Fitting Stories with Homeless Service Gatekeepers*

In the preceding discussion, we described homeless outreach workers' interactions with their clients as they developed fitting stories, or narratives that portray clients as worthy of housing services under existing bureaucratic criteria. Beyond their work with clients, outreach workers also implement policies in part through interaction with other social service workers and with their organizational peers and superiors. In the following discussion, we describe outreach workers' efforts to negotiate fitting stories with service gatekeepers.

Bureaucratic social service agencies are well known for their often rigid demands for various forms of identification and verification in order to qualify for services. The applicability of this perception to homeless services was captured in the response of one outreach worker to the question "What is the easiest type of client to house?" Without missing a beat, the outreach worker replied, "One with all their documentation." However, homeless clients with "all their documentation" walking in the door are rare. The residentially chaotic conditions in which most homeless people live do not lend themselves to managing the various forms of personal documents, from birth certificates and social security numbers to military discharge DD214s and child custody court letters. Since such documents are often required in order to qualify for housing services, the homeless outreach workers we study spend major parts of many workdays tracking down those papers. Outreach workers become experts on whom to contact at various agencies in order to acquire assorted personal credentials for their homeless clients.

One frustration experienced by many outreach workers in the current study involves stringent—and changing—requirements to verify "chronic literal homelessness" in order for clients to be housing eligible. As the length of time homeless and the local criteria for what is considered homeless—that is, "literal homelessness"—changed over time, outreach workers have found it increasingly difficult to document that clients have indeed met the length of time and types of homelessness that fit requisite criteria. On one occasion, for instance, the field researcher met with a case manager, Bobby, who lamented, "I've just been trying to validate my client [that is, the client's status as literally homeless] for the last hour and a half." As the field researcher commiserated with the situation, Bobby showed him a document that had been

developed by a local shelter to list all the nights that the client had used their services. The document listed eleven separate stays in the shelter ranging from one night to four and a half months over a sixteen-month period, with gaps ranging from one night to two and a half months between them. "Now," Bobby explained, "I have also made this other list [pointing to a separate yellow notepad] for all the gaps between the dates on the [shelter] form. I now have to call around to see if I can verify that he was homeless during all those time periods."

Given the demand for verification in the often chaotic contexts of homeless services, as well as outreach workers' centrality in providing such verification, it is perhaps not surprising that at times outreach workers fabricate information or validation in order to facilitate services. A case in point is provided by an exchange the field researcher observed among three outreach workers who were discussing how to provide income verification for a client who at that point had worked for only one pay period and received only one paycheck. Recognizing that landlords required a longer income record than one paycheck, one of the outreach workers who had previous experience in similar situations suggested, "I just write 'times two' so that it doesn't look like they are not employed anymore."

The outreach worker then turned to the researcher and offered her rationale for this fabrication, telling him, "If the client doesn't look like they have income, then they [landlords] won't accept them." The group of outreach workers went on to explain that the client under discussion was scheduled to begin receiving SSDI income that was enough to cover the cost till the time they would actually need the income to pay rent. The misinformation in this case, then, was viewed by the outreach workers as not only harmless but actually necessary to achieve an optimal outcome for both the client and the landlord.

One of the more upsetting challenges faced by outreach workers involves their sometimes fraught relationships with clinical diagnosticians who are charged with diagnosing serious mental illnesses that qualify clients for housing services. Outreach workers commonly interact with clients over a significant period of time before referring them for diagnostic interviews. By the time they refer clients for diagnosis, they have considerable depth of experience with clients' behaviors and mental capacities. While some homeless clients are quickly diagnosed as SMI, clinical diagnosticians often make decisions that conflict with outreach workers' assessments—thus disqualifying clients from housing support. Outreach workers at times attribute clinicians' contrary diagnostic findings to a combination of clients' efforts to come across as "normal" in their clinical interviews and clinicians' assumptions of drug abuse. This

perceived combination of diagnostic missteps is captured in the first author's exchange (while working as an outreach worker) with a coworker, Erica, regarding a client named Hector whom they observed daily talking to voices in the corner of the emergency shelter. Recounting a clinical assessor's interview with Hector, [First Author] explained, "The assessor did not let me in the office last time with Hector. And he [Hector] held it together long enough for the assessor to deny him a diagnosis."

"No!" Erica responded in disbelief. "They denied Hector! How?"

[First Author] replied, "They . . . told me that he is on crack, and that's the reason he hallucinates."

"And when is he able to smoke crack?" Erica objected. "He never leaves the corner over there! That is messed up."

"I know, I know," [First Author] lamented. "But in their eyes, they think to themselves: He's homeless, so he *could* be addicted, so that's the reason he hallucinates. . . . I tell ya, it's getting really old. You and I can spend months observing individuals who talk to themselves and see things, and then the assessor spends twenty minutes with the client and they get denied."

In response to this challenge, outreach workers at times developed strategies for presenting fitting stories to influence the decisions of clinical gatekeepers. Similar to Castellano's (2011) observations of the discretionary power of social work counselors in mental health courts, homeless outreach workers developed strategies for presenting evidence and documentation to diagnosticians that facilitated their fitting homeless clients into service-worthy categories. The skillful use of diagnostically relevant narratives enabled outreach workers to provide diagnosticians with more persuasive cases for SMI diagnosis at opportune times. A case in point is provided by the first author's experience working with Dante, a black man in his early twenties whom he first met as the young man stood in a corner of the shelter, holding up oversized pants that were nearly falling off him while he laughed in an apparent conversation even though no one else was near him.

At their first encounter [First Author] introduced himself as a social service worker and offered to find Dante a belt and socks. As [First Author] gained his trust over the next few weeks, Dante confided that he often "heard voices." He also claimed to never do drugs and to avoid the bathrooms when drug deals were being made. In short, he presented as an SMI homeless man who should qualify for housing services, and [First Author] scheduled a diagnostic interview for him. But fearing that the interview might not provide the clinical assessor with convincing evidence of Dante's serious mental illness, [First Author] consulted the American Psychiatric Association's *DSM-IV* and created a list of relevant SMI diagnoses and corresponding symptoms. His field notes recount:

When I took Dante in to see the diagnostician, I handed a copy of the document to the diagnostician, which clearly stated “Copy” at the top and left to get coffee from a nearby coffee shop. It seemed to work. Dante was diagnosed by the assessor thirty minutes later with paranoid schizophrenia. I transported him back to the emergency shelter so he could wait on word of an opening from a local transitional or permanent housing agency.

Sadly, after spending a month in the emergency shelter where [First Author] met him, Dante disappeared a few days after receiving his service-eligible diagnosis. But having found his new “symptoms form” helpful in getting Dante’s SMI diagnosis, [First Author] continued to use the form and present it to clinical assessors when clients went for diagnostic interviews—and with marked success. None of the clients he deemed service-eligible were denied SMI diagnoses after he began submitting copies of his written forms to the assessors.

## **Conclusions and Implications**

In the preceding pages we have presented findings regarding homeless outreach workers’ use of discretionary power in pursuing housing services for their homeless clients. “To understand street-level bureaucracy,” Lipsky has argued, “one must study the routines and subjective responses street-level bureaucrats develop in order to cope with the difficulties and ambiguities of their jobs” (2010, 82). We have used the concept of fitting stories to describe a set of practices used by homeless outreach workers to manage the difficulties and ambiguities involved in qualifying the homeless for housing services under existing agency policies and criteria. The creation and negotiation of various components of fitting stories underscores the centrality of narrative as key to “the organizational production of types of selves” (Loseke and Cavendish 2001). Consistent with Gubrium and Holstein (2000), we find that the social construction of service-worthy clients involves interplay between the organizational narratives, on the one hand, and “how members artfully put discourses to work as they constitute their subjectivities and related social worlds” (497). In this article, we have broadened the scope of such discourse to include the strategies deployed by homeless outreach workers at two levels: (1) at the client level where they draw in resistant clients to embrace stories about themselves that, while sometimes provoking resistance, offer material advantages, and (2) at the organizational level where outreach workers negotiate the identities and biographical narratives of clients with institutional criteria and agency gatekeepers.

As we have documented, experienced homeless outreach workers often achieve their goals by playing loosely with the letter of the law while holding

strongly to their sense of the spirit of the law. Their strategies for effective service delivery are creatively adapted to the individual circumstances of specific clients. But their individual discretionary activities have a broader collective impact, as captured in Lipsky's observation that, "Where policy consists of the accretion of many low-level decisions, the routines and categories developed for processing those decisions effectively determine policy within the parameters established by authorities. In this sense street-level bureaucrats 'make' policy" (2010, 83–84).

Our findings should be qualified in three ways. First, fitting stories represent only one set of activities engaged in by outreach workers as they pursue their work. We have limited our attention in this article to outreach workers' and case managers' interactions with their homeless clients and other social service staff during the time in which they are pursuing housing for their clients. While this slice of time is critical for understanding the activities of street-level bureaucrats working with the homeless, a broader analysis should also examine (1) outreach workers' strategies for building trusting relationships with their clients that typically precede efforts to fit them into housing services as well as (2) case managers' negotiations with landlords and property managers who have their own issues and concerns that must be addressed (e.g., Desmond 2016). It is our intention to address these issues in future publications.

Second, outreach workers and case managers do not always see the creation of fitting stories as appropriate in their work with clients. At times, workers find homeless clients frustratingly recalcitrant, disingenuous, or even misleading—in which cases, they are not often disposed to actively pursuing housing for them. Not all narrative editing in client interactions we have observed involves what Marvasti terms "collaborative editing." Indeed, more antagonistic forms of narrative editing, including what Marvasti refers to as "confrontational" and "dismissive" editing (2002, 640–48) were observed in the course of outreach workers' interactions with the homeless, but are beyond the scope of this article.

A final qualification is that not all outreach workers are equally adept and committed to aggressively invoking discretionary power through creating fitting stories. It is our sense that newer, less experienced outreach workers tend to view agency rules and criteria as more objective and less subject to potential manipulation than do more seasoned outreach workers. This observation is consistent with previous research (e.g., Lipsky 2010) suggesting that more experienced social service workers have less black-and-white views of organizational policies and criteria and more developed strategies with which to navigate the system. However, our data lack the comparative depth to definitively address this issue.

Such limitations notwithstanding, in presenting this analysis of homeless outreach workers we contribute to the solid history and growing literature on street-level bureaucrats' use of discretionary power, from Darrough's (1983, 1989) research on juvenile probation-placement in the 1980s to G. Miller's (1991) and Anderson's (1999) work on employment counselors in the 1990s, on to Corman's (2017) recent scholarship on assessment work by street-level paramedics. Research on homeless social service workers has played (e.g., Spencer 1994; Spencer and McKinney 1997; Marvasti 2002), and is currently playing (e.g., Ranasinghe 2017), a valuable role in building a rich understanding of the ways in which street-level social service workers manage the conflicts in their work while seeking to provide effective services.

While the assertion of fitting stories clearly benefits some homeless individuals at the expense of rigid bureaucratic integrity, it also ultimately benefits agencies that provide services to the homeless. Homeless service agencies are typically funded through grants that require evidence of services to homeless individuals and families. Agencies must therefore recruit and process sufficient homeless clients to justify continued or increased funding. If the number of homeless individuals meeting funding criteria falls too low, funding is likely to be in jeopardy. The popular social service assumption that there is a large population of SMI among the homeless thus serves as a self-fulfilling prophecy by pushing outreach workers to fit those they serve to SMI narratives—creating evidence for the need for continued funding to serve that population. By fitting the narratives of their homeless clients into existing agency criteria, outreach workers reify the objectivity and value of those criteria rather than calling them into question. In order to be effective in providing services, they must find a way to operate effectively within the existing service framework. However, homeless outreach workers have up-close experience with a wide range of homeless people and they often see limitations in existing policies and perspectives. Many outreach workers see far more homeless people as deserving of housing. Lacking the ability to change official social policies, they persist in aggressively working within the system in ways that widen the net of service eligibility beyond official parameters while avoiding openly challenging those policies.

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1. The names of all social service workers, homeless individuals, and agencies have been replaced with pseudonyms.

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