

GOOD NEIGHBOR GUIDE

**Be a better neighbor to our
unhoused community members**

www.thenightministry.org





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INTRO

The Night Ministry provides human connection, housing support, and health care to youth and adults throughout Chicago who are unhoused or experiencing poverty.

Our clients, many of whom live on the street, often share with us how they feel invisible and ostracized in their neighborhoods. Instead of engaging with them as neighbors who deserve dignity and respect, many of our community members ignore or cause harm to our unhoused neighbors.

There are many stigmas and myths perpetuated against our neighbors who experience homelessness. We hope this guide will educate and prepare our communities to engage our houseless neighbors with respect, kindness, and solidarity.

If you'd like more information about this guide or supporting our neighbors who experience homelessness, reach out to The Night Ministry at info@thenightministry.org or 773-784-9000.



HOMELESSNESS DATA

In total, an estimated **68,440** people were unhoused in Chicago throughout 2021. This is the most recent estimate available, based on data released in 2023.

In 2021, **18,399** minors (under age 18), with or without a parent present, experienced homelessness.

Homelessness disproportionately impacts Chicagoans of color. Chicagoans who identify as Black or African-American made up **53%** of the total population experiencing homelessness in 2021 despite making up about a third of the city's overall population.

Most people without permanent housing temporarily stay with others. In 2021, **65%** of Chicago's unhoused population were temporarily staying with others, in a living situation typically called "doubled up." Surprisingly, homelessness in doubled up situations does not qualify people for federally funded assistance.

In Cook County, **25%** of young people experiencing homelessness identify as LGBTQ+. (Voices of Youth Count)

*Data is from the ESTIMATE OF HOMELESS PEOPLE IN CHICAGO CHICAGO, COALITION FOR THE HOMELESS 2023 unless otherwise noted.

Too little affordable housing, insufficient living wage work, limited access to medical care, and domestic violence are some of the reasons people face homelessness, and only a fraction of those experiencing homelessness are able to access shelter and transitional housing.

HOMELESSNESS INFO

Myths

&

Facts

People who are homeless should just get a job and then they would not be homeless.

Many people who are unhoused do have jobs. The National Coalition for the Homeless estimates as many as 40%-60% of people experiencing homelessness nationwide are employed.

People choose to be homeless.

This myth is dangerous and allows us to ignore the trauma of homelessness. Homelessness is stressful, humiliating, exhausting, and dangerous.

It's their fault that they are homeless.

Homelessness is caused by a complex compilation of circumstances including systemic injustices & structural failures. These include lack of affordable housing, inadequate mental health care, & few jobs that pay a living wage, among many others.

People living on the street should just go to a shelter.

There are not enough shelter beds. Shelters can sometimes separate people from their partners and communities. People can feel that their autonomy is taken away while staying in a shelter.

We will never solve homelessness.

If we treat housing as a human right and not as a commodity to be bought and sold, we can make homelessness rare, brief, and non-recurring.

HOMELESSNESS INFO



- Personal crisis
- Traumatic events
- Mental or physical illness
- Addictions
- Interpersonal conflict or abuse
- Lack of social capital

- Poverty
- Lack of affordable housing
- Lack of accessible health care
- Lack of living wage jobs
- Systemic racism and other inequities

- Immigration
- Release from:
 - Hospitals
 - Jail/Prison
 - Mental health facilities
 - Addiction treatment centers
 - Foster care

Additional causes of youth and young adult homelessness include family conflict, queerphobia, and pregnancy.

DIGNITY

Dignity is the first thing we consider when being a good neighbor to people who are unhoused. When we consider the dignity of our neighbors, we honor their inherent worth and respect their full humanness.

Lead with empathy and compassion. When we encounter our neighbors, we don't know their stories or the complex realities that led to their homelessness. We approach our neighbors with the understanding that our own pre-conceived ideas and internal biases may cloud our ability to be accepting and nonjudgmental.

Empathy asks that we attempt to understand someone else's reality without making assumptions. Compassion asks that we place our neighbors' needs and desires before our own fears and biases.

Prioritize autonomy. People experiencing homelessness should be able to make choices that impact their lives. Assuming that houseless folks should or will accept help or services doesn't honor their autonomy and choice.

Respecting choice applies to food, clothing, shelter, utilization of resources, and interaction with others. Sometimes, people who want to "help" offer resources that aren't actually helpful. Before offering a specific resource or donation, we should ask our neighbors what they want or need.

We should respect our neighbors' choice to reject any offer of help. It's valid if they don't like our secondhand shoes, refuse to eat what we offer, or decline to sleep in a shelter that feels unsafe.

DIGNITY

Practice inclusivity. People who experience homelessness should be included in the conversations and actions that impact their lives and included as full neighbors in neighborhood activities and discussions. Talking about neighborhood safety? Ask your houseless neighbors what ideas they have. Holding a neighborhood event? Invite your houseless neighbors and ask them how to make your event accessible and welcoming.

Our physical neighborhood spaces must also be inclusive. When we remove park benches, limit public restrooms, or make it illegal to sleep in public spaces, we demonstrate that our houseless neighbors are not welcome.

In order to be good neighbors, we must treat our neighbors experiencing homelessness as full and important members of our community. Too often, we attempt to "address" homelessness without acknowledging and including the voices, ideas, and desires of our neighbors who experience homelessness.

What Our Clients Say

People would rather walk in the street than walk past us. They treat us like the scum of the earth. Just because someone is down doesn't mean they're out. We've got to come together and look out for one another. - *Steven*

I wish people would treat us nicer. People say, "they're just drunks," but we're regular people. Now that I'm housed, I'm always inviting people over. When I get lunch, I get two so I can feed someone else. - *Eddie*

STREET HOMELESSNESS

Our Street Medicine Team primarily serves clients who experience street homelessness. The 2023 Point-in-Time Count in Chicago found 990 individuals were living on the streets or in locations not meant for human habitation.

We often hear the question: **Why do people stay on the street instead of going to a shelter?** There are many reasons why our neighbors live on the street or sleep on the CTA instead of staying in a shelter.

First, it's important to acknowledge that people will choose to live in places that aren't made for human habitation if there aren't safe, affordable, and appropriate places for them to live.

Reasons why people avoid shelters include:

- Shelters can feel unsafe and unsanitary
- Shelters don't always allow families to stay together, separating partners and not allowing pets
- Some shelters have religious and lifestyle requirements
- Lack of privacy and personal space in congregate settings
- There is a consistent lack of beds

Street encampments can provide a sense of **community, safety, and camaraderie** to those who live there. Residents look out for each other and provide support when they can. Often, people living in encampments don't want to give up safety and stability for shelter and housing systems that are inconsistent and unreliable.

PANHANDLING

Begging, solicitation, or panhandling are the names given to acts of asking for help by people experiencing homelessness and those at risk of homelessness.



Myth: *I should/shouldn't give panhandlers money.*

Fact: The decision to donate money rests solely on you. There is nothing wrong with giving money to those who ask for help. If you choose not to give, make eye contact and decline politely.

Myth: *Panhandlers will spend donated money on drugs or alcohol.*

Fact: Several studies show that when money is donated to panhandlers, most spend it primarily on food and other necessities.

Myth: *Panhandlers make tons of money.*

Fact: One study estimates that the average panhandler only makes about \$300/month panhandling. When people ask for help it's because they need it.

Myth: *Panhandlers are lazy and don't want to work.*

Fact: The success of work programs shows us that panhandlers who can work will if given the opportunity to do so.

Myth: *Anti-panhandling ordinances will decrease panhandling.*

Fact: Panhandling is caused by lack of adequate, affordable housing, low wages, lack of health care, and other systemic causes. Addressing people's survival needs is the best way to end panhandling.

*Info from the [National Homelessness Law Center](#)

In 2018, Chicago City Council repealed the city's panhandling ordinance, which had previously made it illegal to panhandle. In 2021, a Federal Court ruled that Illinois' law restricting panhandling was unconstitutional.

HARM REDUCTION

Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use. **Harm reduction** is also a movement for social justice built on a belief in, and respect for, the rights of people who use drugs. Harm reduction saves lives.

At The Night Ministry, our Health Outreach Teams practice **harm reduction** and supply our clients with **harm reduction** supplies such as clean syringes--often referred to as "rigs" on the street--and doses of Narcan (naloxone), an injectable medication which blocks the effects of opioids and can potentially save a life in the event of an overdose.

Harm Reduction Principles from [The National Harm Reduction Coalition](#)

Accepts, for better or worse, that licit and illicit drug use is part of our world and chooses to work to minimize its harmful effects rather than simply ignore or condemn them.

Establishes quality of individual and community life and well-being — not necessarily cessation of all drug use — as the criteria for successful interventions and policies.

Ensures that people who use drugs and those with a history of drug use routinely have a real voice in the creation of programs and policies designed to serve them.

Recognizes that the realities of poverty, class, racism, social isolation, past trauma, sex-based discrimination, and other social inequalities affect both people's vulnerability to and capacity for effectively dealing with drug-related harm.

Understands drug use as a complex, multi-faceted phenomenon that encompasses a continuum of behaviors from severe use to total abstinence, and acknowledges that some ways of using drugs are clearly safer than others.

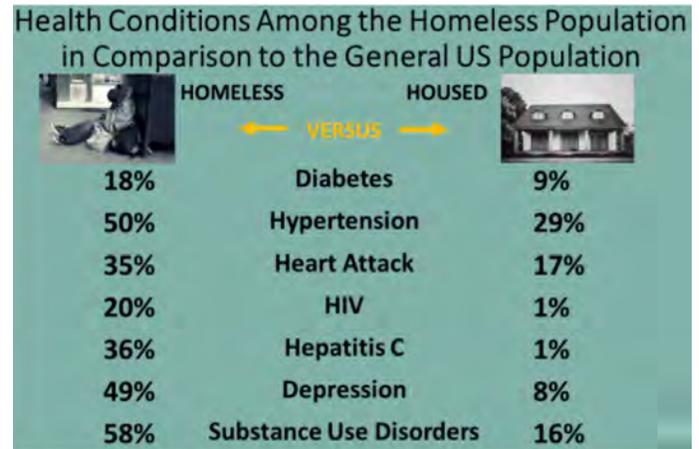
Calls for the nonjudgmental, non-coercive provision of services and resources to people who use drugs and the communities in which they live in order to assist them in reducing attendant harm.

Affirms people who use drugs (PWUD) themselves as the primary agents of reducing the harms of their drug use and seeks to empower PWUD to share information and support each other in strategies which meet their actual conditions of use.

Does not attempt to minimize or ignore the real and tragic harm and danger that can be associated with illicit drug use.

HOMELESSNESS & HEALTH

People who experience homelessness have higher rates of illness and die on average **12 years sooner** than the general U.S. population.



Source: Health Center Patient Survey (HCPs) 2009

Poor health (illness, injury and/or disability) can cause homelessness when people have insufficient income to afford housing. This may be the result of being unable to work or becoming bankrupted by medical bills.

Living on the street or in homeless shelters exacerbates existing health problems and causes new ones. Chronic diseases, such as hypertension, asthma, diabetes, mental health problems and other ongoing conditions, are difficult to manage under stressful circumstances and may worsen. Acute problems such as infections, injuries, and pneumonia are difficult to heal when there is no place to rest and recuperate.

Living on the street or in shelters also brings the risk of communicable disease (such as STDs or TB) and violence (physical, sexual, and mental) because of crowded living conditions and the lack of privacy or security. Medications to manage health conditions are often stolen, lost, or compromised due to rain, heat, or other factors.

When people have stable housing, they no longer need to prioritize finding a place to sleep each night and can spend more time managing their health, making time for doctors' appointments, and adhering to medical advice and directions. Housing also decreases the risk associated with further disease and violence.

WHAT TO DO

-  Get to know your housed and unhoused neighbors. Being a good neighbor requires relational proximity.
-  If you are asked for money or help, be respectful and kind, and make eye contact. Give money, food, or other survival items if you feel comfortable. If you are asked for assistance you cannot provide, you can call 311 for homelessness services. The Department of Family and Support Services (DFSS) leads a multi-agency response to 311 requests that includes a targeted encampment response/navigation team, low barrier shelter placements, overnight encampment outreach, and an encampment physician. Ask your neighbor if they would like for you to call.
-  For a medical emergency, call 911. You can ask that only medical support arrive, without police, but that does not guarantee that police will not arrive. Stay present once help arrives to help ensure that police will not escalate the situation, as many of our houseless neighbors have had harmful experiences with the police.
-  Do not call the police on individuals experiencing homelessness unless you or someone else is in eminent danger of physical harm.
-  To get more involved in your neighborhood, contact your alderperson to learn about homelessness response and indicate your support for respectful and neighborly responses.
-  Find a mutual aid network in your community and get involved. Mutual aid promotes solidarity and support between all members of a community.
-  Support direct service providers, like The Night Ministry, who create relationships with community members who experience homelessness and can respond directly to needs.
 - Volunteer (visit thenightministry.org/volunteer to learn more).
 - Donate money (visit thenightministry.org/donate).
 - Provide food and other items (visit thenightministry.org/wish-list).
 - Advocate for and with your houseless neighbors by supporting legislation for affordable housing, free health care, and other public support systems

ADVOCACY

The Night Ministry Advocacy Partnerships

Citywide

- **Chicago Coalition for the Homeless:**
www.chicagohomeless.org
- **ONE Northside:** onenorthside.org

State

- **Illinois Association of Free & Charitable Clinics:**
www.illinoisfreeclinics.org
- **Illinois Harm Reduction and Recovery Coalition:**
www.illinoisharmreduction.org

National

- **National Health Care for the Homeless Council:**
nhchc.org
- **National Alliance to End Homelessness:**
endhomelessness.org
- **National Network for Youth:** nn4youth.org

RESOURCES

MENTAL HEALTH FIRST AID

Mental Health First Aid teaches how to identify, understand and respond to signs of mental illnesses and substance use disorders. More information or get trained at www.mentalhealthfirstaid.org.

TRAUMA INFORMED CARE

Trauma informed care is an overarching structure and treatment attitude that emphasizes understanding, compassion, and responding to the effects of all types of trauma. Trauma informed care also looks at physical, psychological, and emotional safety for both clients and providers, and provides tools to empower folks on the pathway to stability. More information at <https://nationalhomeless.org/issues/trauma-informed-care>.

NATIONAL HARM REDUCTION COALITION

The National Harm Reduction Coalition builds power and equity with people who use drugs through access, advocacy and action. They create spaces for dialogue and action that help heal the harms caused by racialized drug policies. More information at <https://harmreduction.org/>.

CITY OF CHICAGO HOMELESS SERVICES

The City of Chicago provides homelessness services through the Department of Family and Support Services. More information at <https://www.chicago.gov/city/en/depts/fss/provdrs/emerg.html>.

NATIONAL RUNAWAY SAFELINE

The National Runaway Safeline provides crisis intervention services to young people and their families while also offering prevention, educational and training programs to the network of runaway and homeless youth (RHY) service providers nationwide. More information at <https://www.nationalrunawaysafeline.org/>.





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HUMAN CONNECTION • HOUSING • HEALTH CARE