

Department of Social Welfare and Development
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Legarda, Manila



OUT OF THE CENTER AND INTO THE STREETS: How Repeatedly Rescued Clients of Jose Fabella Center Find Their Way Back to Homelessness

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ABSTRACT

This study is a qualitative exploratory research focused on habitually/repeatedly rescued clients of the Jose Fabella Center. The general aim of this study is to determine how former clients of JFC find their way back into streets. It focuses on their most recent experience of reentering homelessness. Attention is given on a specific time-window: from the time the participants left the gates of the center up to the time they ended up living in the streets again. It does not cover a review of interventions given while the clients were still under the JFC's care nor an assessment of the LGUs' work. The study looked into the conditions of the clients when they left the Center until they ended up back in the streets.

The study involves ten (10) of the most repeatedly rescued cases of JFC who are within the care of center within the two-week period. Participants were limited to 18 years old or older and capable of providing a coherent oral account of their last departure from the center.

It was found that most repeatedly rescued clients end up right where the MMDA picked them off. Majority of the clients went back to the streets within an hour to one day after being released from the center. The main factor which pushed back clients into the streets, as recognized by the participants themselves is how the streets provide them with a source of living. A key finding is that while repeatedly rescued clients of JFC are all formally discharged from the center, they are not provided with any substantive intervention. Some are provided with food and clothing and while others are not. There is no intervention in areas recognized in the literature as being vital to helping people move out of homelessness, namely: income support, housing support as well as in terms of addressing substance abuse.

TABLE OF CONTENT

TITLE PAGE	i
ABSTRACT	ii
TABLE OF CONTENTS	iii
Background of the Study	1
Research Problems and Questions	2
Review of Related Literature	3
Objective of the Study	4
Conceptual Framework	5
Analytical Framework	6
Significance of the Study	7
Scope and Limitation of the Study	7
Operational Definition	8
Research Design	9
Sampling Method and Recruitment	9
Method	9
Data Collection	10
Data Gathering Tool/Instrument	11
Data Presentation	11
The Participants' Experiences with Homelessness	11
Experience at JFC and After	16
Experiences at and Their Last Referral to JFC	16
Leaving JFC and Finding Their Way Back Home	17
Factors That Help Keep Them Off and On the Streets	19
Analysis	21
Conclusion and Recommendations	24
References	27
Appendices	
Appendix A: GUIDE FOR SEMI-STRUCTURED INTERVIEW (English Version)	
Appendix B: GUIDE FOR SEMI-STRUCTURED INTERVIEW (Tagalog Version)	
Appendix C: Revised Research Proposal per Comments of NRD-TWG	
Appendix D: Endorsement of Revised Research Proposal to PDPB	
Appendix E: Approval of the NCR Research Proposal	
Appendix F: Request for Extension on Completion of FO-NCR Research	
Appendix G: Response on the Memorandum Dated May 21, 2010	
Appendix H: Acknowledgement and Comments on Research Report	

BACKGROUND OF THE STUDY

Homelessness is a worldwide phenomenon that affects not only developing countries like the Philippines, but also affluent countries like the United States, the United Kingdom and Japan. An estimated 100 million people worldwide are homeless (Capdevila 2005).

This study is focused on repeatedly rescued clients at the Jose Fabella Center (JFC). The JFC is one of 13 centers of the Department of Social Welfare and Development-National Capital Region (DSWD-NCR) which provide diagnostic and short-term rehabilitative services to individuals, groups and families in transient situations while availing of temporary shelter and custodial care. In partnership with the JFC, the Metro Manila Development Authority (MMDA) has been implementing the Metro Gwapo Project in which street dwellers are 'rescued' – the term used by the MMDA and the JFC - off the streets. The rescued street dwellers are routinely turned over to the JFC for appropriate support and intervention. The MMDA regularly refers rescued clients four times a day with a minimum of 15 clients per referral.

During the course of their work, the JFC and the MMDA have encountered clients who return to a state of homelessness and are again found living in the streets despite interventions provided by the Center and Local Government Units (LGU). They are referred to as repeatedly rescued clients. In this study, street dwellers are regarded as homeless people and the terms 'homelessness' and 'street dwelling' are viewed as describing the same phenomenon and considered interchangeable. The homeless include mendicants, beggars, vagrants, transients and adults with special needs by themselves or within a group or family.

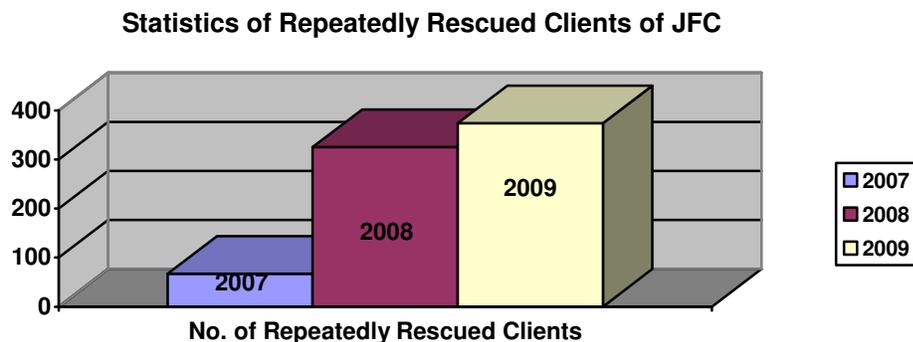
In the first semester of 2008, the JFC recorded a total of 394 clients who came from Metro Manila areas and nearby cities and municipalities of NCR such as Cavite, Antipolo and Bulacan. Likewise, the MMDA's records indicate that 379 street dwellers have taken off the streets several times. These clients were placed by the MMDA in their watch list and considered as needing further intervention from the Department.

This study sought to explore the experience of repeatedly rescued clients in finding their way back into the streets after being discharged from the JFC. The study focused on adults with the most number of repeated admissions. It looks into the events from the moment of discharge of clients to the time when clients again find themselves back in the streets. The results of this study will be useful in enhancing intervention, particularly the management of repeatedly rescued clients and the improvement of programs and services at JFC and LGUs to minimize the recurrence of homelessness among discharged clients.

RESEARCH PROBLEM AND QUESTIONS

It is assumed that, with the interventions given by the JFC and LGUs, clients are supposed to be able to avoid homelessness. And yet many of such clients are repeatedly found to be living in the streets again. The research asks the question: what happened to clients from the time they were discharged from the center to the time they found themselves back in the streets?

In the 3 years record of MMDA and Jose Fabella Center, the number of repeatedly rescued clients has been increasing. It can be noted that from December 2007, there are 67 persons identified which increased to 325 to 374 in 2008 to 2009 respectively. (*Graph 1*)



Graph 1

Identifying the factors affecting the increase in number of repeatedly rescued clients is what this study intends to do. There is a need to look into the circumstances in which these clients left the center and ended up back in the streets again. Specifically, the study analyzes the experiences of selected participants after their discharge from the center up to the moment of their return to the streets. It involves a detailed review of the events and circumstances that brought them back to streets. This study will sought answers to the following questions:

1. What were the circumstances of the last departure of clients from the JFC?
2. How much time did it take for clients to end up back in the streets?
3. What factors, if there are any, temporarily helped clients stay off the streets? and
4. What contributing factors that pushed the clients back into the streets?

REVIEW OF RELATED LITERATURE

Researches on homelessness cover a broad range of approaches. Rather than gather all of these, this review focuses on key international literature and local studies most relevant to the research problem.

Homelessness, as a social construct, has a varied set of definitions. In practical terms, legal definitions have important implications for social welfare since they define legal mandates and limitations. Understandably, however, legal definitions of homelessness are considerably restrictive. The US Federal government defines the chronically homeless as homeless individuals with a disabling condition who have been homeless either (1) continuously for one whole year, or (2) four or more times in the past three years (US Department of Housing and Urban Development 2006). The qualifier 'disabling condition' coupled with the rather extended time frame help exclude what may be regarded as the 'able' homeless on shorter term episodes of homelessness from legally mandated support and services. This is helpful in the administration of limited program resources but not very useful in studying the phenomenon of persistent homelessness. For this study, we will adopt a looser definition of chronic homelessness that is not confined to individuals with a disabling condition.

A lot of effort was done to explain homelessness. A fundamental question is why some people become homeless and others in the same situation do not, and why some exit homelessness while others do not. Votta and Manion (2003) suggested it may have something to do with different abilities to cope or different levels of resilience. Among the factors that have been considered include: (1) genetic predisposition, (2) the anatomy of the brain, (3) its biochemical state, (4) the person's family upbringing, (5) the way society has treated the person, and (6) the stimuli that impinge upon the person. These factors that have been proposed as possible sources of homelessness represent the dichotomy between structural and individualist conceptions of homelessness. Many researchers argue that a combination of factors is the most likely case. But what should not be overlooked is how poverty and the shortage of affordable housing underlie most cases of homelessness (Ji 2006). To separate homelessness from poverty and housing is to ignore some of its fundamental causes.

Conceivably, the longer people stay in homelessness, the greater the chances for them to get entrenched in it. Grisby, Bauman, Gregorish, and Roberts-Grey (1990) argue that individuals who replace lost ties to family and friends by joining a group of other street people may become acculturated to homelessness as a way of life. Homelessness becomes more entrenched as people progressively lose social support and affiliation. This may explain the case of repeatedly rescued clients who keep returning to the streets; either they have become thoroughly socialized into homelessness or have lost the support network that would enable them to escape it.

Ideas about how to get people out of homeless also vary much as the answers to the question of why people become homeless. There are those who emphasize strong agency and personal change, with MacKnee and Mervyn (2002: 304) proposing the following measures: (1) establishing supportive relationships with mainstream role models or mentors; (2) separating from their street environment and their street peers; (3) discovering and developing their natural creative, scholastic, or leadership abilities; (4) accepting personal responsibility; (5) realizing the significant nurturing role of parenthood; (6) gaining accountability and sobriety by giving up substance dependency; (7) becoming independent from welfare and social assistance; (8) attending education programs; (9) engaging in legitimate employment; (10) acknowledging their physical, emotional, spiritual, and moral deprivation.

Current literature generally point to supportive housing and income support as essential elements for effective intervention in keeping the chronically homeless off the streets (Burt et al., 2004; Ji 2006; LenMac Consulting 2005). These are key components in the fight against chronic homelessness in the US both at the federal and state levels. Only with the provision of affordable housing, adequate income and access to basic services such as health care within a supportive environment can homelessness be effectively prevented and ended.

A number of local studies have been done on the homeless or street dwellers. This review does not include studies on street children. Alcazar (2001) adopted a phenomenological approach in exploring how street dwellers in a certain section of one of Metro Manila's main thoroughfares constructed their social reality and their life world. Dung (2003) looked into the needs, problems, aspirations and living conditions of selected street families with the view of creating a better understanding of their situation leading to better and more responsive services from public and social welfare authorities. A similar study was done by Ferrer (2003) who examined the demographic profile, lifestyle patterns and needs of some street dwellers in the City of Manila. Eboña (2000) analyzed the socio-economic and self-perceived factors of mendicants in selected areas in Metro Manila with the aim of understanding their life. A key finding of Eboña (2000) is that many mendicants are from poor families trapped in a cycle of poverty who find mendicancy as an effective means of fighting helplessness and destitution and providing for their needs.

OBJECTIVE OF THE STUDY

The general aim of this exploratory research was to determine how former clients of the JFC find their way back into the streets. The study focused on their most recent experience of reentering homelessness. The study attempted to document the process from the time they last left the gates of the JFC until they ended up back into the streets. Specifically, it aimed to:

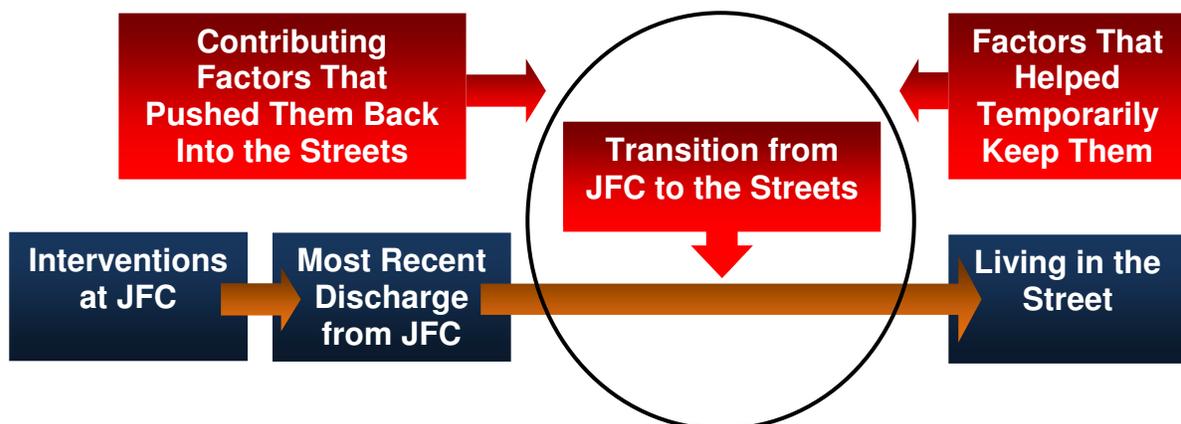
1. Ascertain the conditions in which they left the JFC;
2. Determine the amount of time it took them to get back to living in the streets;
3. Identify factors that helped them in temporarily avoiding living in the streets, if there are any; and
4. Examine contributing factors that pushed them back into the streets.

CONCEPTUAL FRAMEWORK

This study is focused on a particular time window which is between the moment the clients were last discharge from the JFC up to the time they ended up living and sleeping in the streets of Metro Manila again. Figure 1 below illustrates in graphic form the conceptual framework for this study.

Some studies, like a number of the local ones covered in the literature review, focus on people’s experiences on living in the streets. Alternately, a program evaluation approach would focus attention on the interventions undertaken at the JFC before clients were discharge or the immediate results of such interventions. The study does not focus on any of these. The study will retrace the journey of the participants from the time they left the gates of the JFC up to the time they found themselves living in the streets again. This focus is considered important because it can give insights on the issues and problems that arose after their discharge, the analysis of which could point to appropriate interventions needed to keep such clients off the streets. Relevant questions include: How long did they stay off the streets? What issues and problems forced them back into the streets?

Figure 1
Conceptual Framework

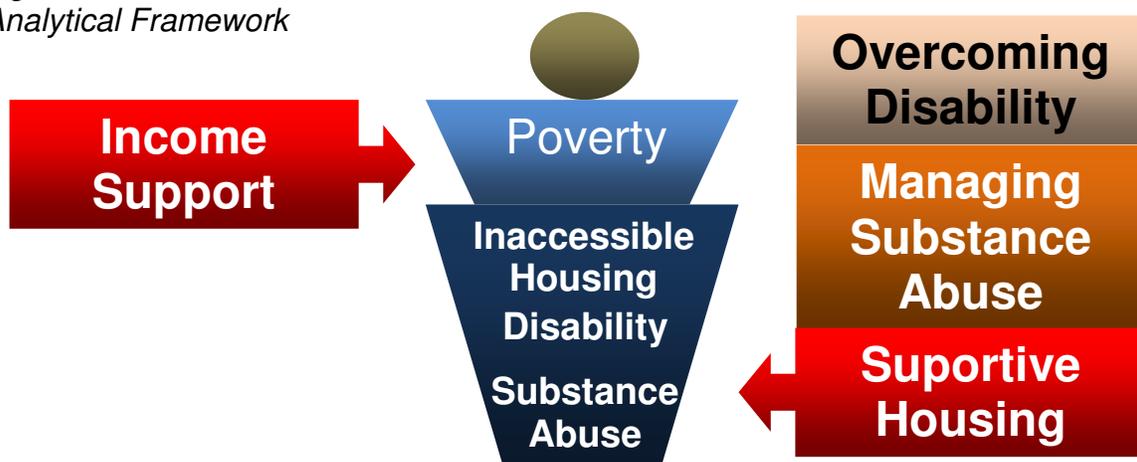


ANALYTICAL FRAMEWORK

The literature points to a number of factors that are closely linked to the problem of chronic homelessness. It is widely recognized that chronic homelessness is often accompanied by some form of disability or substance abuse (National Alliance to End Homelessness 2007; U.S. Department of Housing and Urban Development 2007). As such, these two will be considered in reviewing the experiences of the participants. Mental disability and substance abuse would, of course, have drastic implications to the ability of people to sustain housing in that it can limit or altogether preempt opportunities to sustain economic productivity that will enable a person to afford housing, not to mention the need to manage and maintain a housing unit if they do have such. These can be considered as factors within the individuals that relate to the experience of being homeless. It would be faulty to assume a cause and effect relationship between these and homelessness because, while they are correlated, they do not necessarily have such relationship. Homelessness, mental illness and substance abuse may all be the effects of a more fundamental problem. Figure 2 below outlines the analytical framework for the study.

For many of those involved in work to eliminate chronic homelessness, the provision of income support and supportive housing are some of the most vital interventions needed by homeless people to be able to stay off the streets (Burt et al., 2004; Ji 2006; LenMac Consulting 2005). Their presence or absence can spell the difference between a recurrence in homelessness or a more stable access to shelter. As such, they may be considered as factors or resources external to the individuals that are vital to people's capability to sustain shelter/housing. These will also be among the factors that will be considered in analyzing the experiences of the participants.

Figure 2
Analytical Framework



SIGNIFICANCE OF THE STUDY

This study explicates the process by which former JFC clients found themselves back in the streets. The knowledge and insights gained from this study can influence future efforts in improving the case management and delivery of services of the JFC and of LGUs as well. Specifically, this study will be beneficial to the following:

1. Department of Social Welfare and Development (DSWD) – The department is mandated to provide programs and services to marginalized groups. This study will help the DSWD in determining appropriate and adequate interventions needed for street dwellers. This study can also influence enhancement or formulation of policy, including the amendment of the Anti- Mendicancy Law.
2. Local Government Units (LGUs) – LGUs are mandated to provide front line services in the implementation of social welfare and development programs and delivery of services. This study will help them in reviewing their programs for street dwellers, particularly the after care services needed by clients discharge from the JFC.
3. Metro Manila Development Authority (MMDA) – The knowledge gained through this study will help the agency in assessing their anti-mendicancy project, particularly the policies and guidelines governing its implementation.
4. Legislators – This study can aid the legislators in drafting policies to respond to the problems of the chronically homeless and in reviewing the Anti-Mendicancy Law.
5. Clients – Clients of JFC and LGUs can benefit from the improvements in service delivery and enhancement of helping interventions that will be introduced as a result of insights gained from the study.

SCOPE AND LIMITATIONS OF THE STUDY

This study is focused only to clients of the JFC as a diagnostic center under the DSWD-NCR. Hence the findings may only be generalizable beyond the clients of the center from which the participants of this study will be drawn. Only adults, those 18 years old and above, were included as participants of this study. Thus, this study does not include the experience of street children. The data collection methodology was generally limited to self-reported accounts of the participants of what transpired after their most recent discharge from the JFC. This excluded clients who were mentally or physically incapable of providing a coherent oral account. There may be some inaccuracies in the accounts of the

participants considering the possibility that the events referred to may have occurred in the relatively distant past.

Attention was focused on a specific time-window: from the time the participants left the gates of the JFC up to the time they ended up living in the streets again. It does not cover a review of the interventions given while the clients were still under the JFC's care. This study also does not include an assessment of the work of JFC and LGUs. The study will not look into the conditions of the clients once they were already back to living in the streets.

OPERATIONAL DEFINITION

1. Chronic homelessness – dwelling on the street or in an area not designated as a dwelling unit either continuously for one whole year, or four or more times in the past three years
2. Discharge – the formal process of releasing clients with due authorization as prescribed by Center guidelines
3. Abscond – departure from the Center by clients without proper authorization
4. Street dwelling – eating and sleeping on the streets or in an area not built and designated as a dwelling unit.
5. Repeatedly rescued clients - refers to clients of JFC who were rescued off the streets more than once and were returned to JFC for shelter and intervention.
6. Demographic characteristics – refers to the identifying information of the repeatedly rescued clients of JFC such as age, civil status, educational attainment and physical characteristics/disability.
7. Income/livelihood source – the source of an individual's economic means to support her/his needs
8. Housing/shelter – a structure designed and intended to serve as living quarters
9. Substance abuse – the indulgence in a drug or other chemical (e.g., heroine, alcohol) leading to a dependence that undermines an individual's physical and/or mental health and undermines their ability to look after their welfare and that of others.

10. Disability – a physical or mental impairment that substantially limits one or more major life activities (Americans With Disabilities Act of 1990)
11. Supportive(ed) housing – refers to a program that allows individuals long term access to shelter with the provision of vital skills (e.g. budgeting and financial management, meal planning) and community resources and support (e.g., community participation, mobility/transportation).
12. Income support – refers to support given to individuals that would ensure they have access to an adequate level of income.

RESEARCH DESIGN

This section outlines the design of the research. This is a qualitative, exploratory study focusing on repeatedly rescued clients of the JFC.

Sampling Method and Recruitment

This study involved an in-depth case study of ten (10) of the most repeatedly rescued cases of Jose Fabella Center (JFC) who are within the care of the center within a two-week period which started on March 2nd week to 3rd week 2010. The records of the JFC served as the sampling frame. The unit of analysis of this study is the individual JFC client. The participants were purposively chosen. The top 10 most repeatedly rescued clients within the period of the study were chosen.

Based on plan, five of the participants should be male and the other five, female, however based on the actual data gathering majority of rescued clients were male hence the proponent selected 3 more male respondents to complete the sample size. The actual distribution of sex of participants is 8 males and 2 females. The participants selected were all above 18 years old and capable of providing a coherent oral account of their last departure from the JFC.

Method

The primary data gathering method employed in this study is the semi-structured interview. Secondary data was used in establishing some information related to the cases selected. The following concepts were investigated:

Objectives	List of Concepts	Method of Data Collection	Data Source
1. Determine the conditions in which the clients left the	Disability Substance abuse	Use of secondary data	Clients Case records

JFC: -any disability or substance abuse found while at JFC -discharged or absconded	Discharged Absconded		of JFC and LGU
2. Determine how long it took for the clients to end up back in the streets	Living on the street	Interview	Clients
3. Identify factors that helped them temporarily avoid living in the streets, if there are any	Factors that aided clients in staying of the streets	Interview	Clients
4. Examine issues and problems that pushed them back into the streets	Issues/problems that pushed clients back into the street	Interview	Clients

*Table 1
Variables to be investigated*

Data Collection

Pretesting of the interview instrument was undertaken using 3 sample respondents from JFC. This was done 1 week prior to the actual interview of the study. During the pre-testing the tool was translated to Tagalog and was tested to 3 respondents composed of 1 female and 2 male client. The questions were found to be comprehensible and responses corresponded to the data needed in the study. Hence, the tool was finalized and used for the actual data gathering.

Based on the research plan, the case records of all prospective participants were supposed to be reviewed by the interviewer for pertinent details before the actual interviews are conducted. However, in the actual data gathering, the researchers had difficulty retrieving case records from the center. It turned out that out of the 10 participants selected; only 1 had a case folder. The rest only had intake sheets. In the absence case records with which to validate information, the researchers had to rely on the data directly gathered from the participants during the interview.

The interview participants were extended an oral invitation to participate in the study which will include: (1) the objectives of the study, (2) a note on the benefits to be gained from the study, (3) the amount of time needed for their participation, (4) an explanation that their participation should be strictly voluntary with no implications for their stay at the JFC whatsoever, and (5) a note that their identity will be treated confidentially. Interviews were recorded for the purpose of achieving accurate transcriptions. Participants were asked to orally confirm their voluntary participation in the study and their permission to have the interview recorded. The interviews were held in the conference room of the JFC which

provided privacy. Participants were assured that the exchange was confidential. Confidentiality measures were followed accordingly. Only the researchers had access to the records and recordings pertaining to the study.

Data Processing and Analysis

The study mainly involved qualitative data. The transcriptions were prepared by the researchers and recordings were destroyed in keeping with the confidentiality measures of the study. The transcriptions were read and coded by the researchers. In the coding, the researchers paid attention to the concepts outlined in the analytical framework. After coding was completed, the codes were analyzed for themes which then gave way to a discussion of results and findings.

Data Gathering Tool/Instrument

The data gathering instrument for the interviews consisted of 10 questions drafted in English and then translated to Tagalog for the purpose of making them comprehensible to the Tagalog-speaking participants. Please find attached as *Annex A* the guide for the semi-structured interviews.

DATA PRESENTATION

The participants' experiences with homelessness and their accounts of how they ended back in the streets after the last time they left JFC provide insights as to how they repeatedly find their way back to homelessness after being brought to the Center a number of times. In this section, we will first look into the participants' experiences with homelessness. Then, we will examine their previous experience(s) of being at JFC and ending up back in the streets after leaving the center.

The Participants' Experiences with Homelessness

This section provides a brief account of the experience of the ten (10) study participants with homelessness. The accounts include their earliest experiences of homelessness and their current living conditions to show the extent to which being homeless forms part of and affects their lives. We shall briefly look at the case of each of the 10 study participants.

Jose, 18 years old, was born in Romblon. He finished grade school at Zamora Elementary School. His parents came from Romblon but he was brought to Manila by a certain Manuel when the client was just one year old with the

permission of client's biological parents. Client lived in the Pandacan, Manila together with the other children for a number of years.

Client and the other children he was living with sold Sampaguita in Pandacan while they were under the custody of Manuel. Manuel would ask them to turn over their earnings and just let them keep five pesos. This all changed when a fire broke out in 2004. Manuel left and they all went their separate ways. It was then that he started loitering and living on the street. Perhaps due to the hardships of living on the street, he suffered a mental illness. In 2007, client together with the other street children was rescued at Boni Avenue, Mandaluyong City and referred to Jose Fabella Center for intervention. JM was in the care of JFC for 3 years before he was discharged. He reported having received successful intervention for his mental illness while in the Center. Upon discharge though, he had nowhere to go and so he returned to where he used to live in Boni Avenue. He has been referred to the JFC several times, the last time being in March 2010.

He stays at the PICC, Lawton, Makati and Boni Avenue, Mandaluyong City. While in the street, JM works as a jeepney/taxi caller and does some scavenging work. He said he sniffs rugby and solvent and smokes cigarettes.

Alvin, 20 years old, is a native of Butuan City. His family of orientation is living in the said province. He is the 2nd child of 6 siblings in their family. He came to Manila when he was 10 yrs old without permission and knowledge of his parents. He took trucking or "roro" going to Manila.

He temporarily lived in his friend's house in Calbayog, Mandaluyong City during his first month in Metro Manila. Afterward, he decided to leave his friend's house and started to loiter in streets. Accordingly, he lived in the grounds of the PICC for 9 months and was rescued and referred to AHON Bata sa Lansangan where he stayed for 2 years. Thereafter, he left the said center without any permission. Since then, he has been admitted to various centers/institutions in Metro Manila like RAC Manila, Boys Town, Alay Pag-asa, National Training School for Boys and the Jose Fabella Center.

The participant admits to sniffing rugby, solvent and acetone, smoking marijuana and cigarettes and drinking liquor. Presently, he stays with friends in Crossing, Ortigas, Pasig City. He works as a jeepney/taxi caller in to earn a living. Based on his account, he has been brought by the MMDA to JFC four times. He first came to JFC when he was just 14 years old. His last admission was March 2010.

Sebastian, 32 years old, single, is a native of Zamboanga Del Norte. He was recruited to work as poultry helper in Bulacan in 1990. After his work in the poultry farm ended, he engaged in construction work in various places in Metro Manila for 6 years. When no new construction projects came his way, he decided

to look for another job to sustain his basic needs. These days, he is working as a vendor in Luneta. He explained that he sells mats which he gets of around 7 pesos each and sells for at least twice as much. He usually sells around 5 of these in a day and so he can earn around 40 a day doing this.

Client explains that he spends the night in the MMDA's Gwapotel in Intramuros Manila if he has earned enough for the day to afford the PhP 30.00 fee. These days, however, he said he often ends up sleeping next to the Gwapotel for lack of money. According to him, he has been referred to RAC-Manila several times and rescued twice by MMDA and referred to Jose Fabella Center. He first came to JFC in February, 2009. His last admission was March 2010.

Benjie, 22 years old, finished only grade 1. A native of Bicol, his parents separated when he was 10 years old. His mother brought him in Manila and lived in Barangka, Mandaluyong City for a time. What happened after then? Since his mother has her own family, he decided lived alone. He leaves their house in the said address and started to live in the streets.

Currently, two of his siblings live in Puting-bato, Antipolo City. But Benjie does not want to live with any of his siblings noting that they have their own families to take care of. He added that he also feels more comfortable living on his own in the streets: 'Mas masarap tumira sa kalye dahil nagagawa ko yun gusto kong gawin (Living on the street is better because I can do what I want)'.

He has been admitted several times in RAC-Manila and Pugad Don Bosco Foundation in Makati City; however, he managed to escape from the said centers. He was referred to Jose Fabella Center since year 2007 by MMDA and considered as habitually rescued client. He has been in and out of JFC fifth times. Presently, the client is living in Crossing Ave., Mandaluyong City where he works as a parking attendant and jeepney caller as a source of living.

Daniel, 45 years old, is a native of Daraga, Albay. He separated from his wife with one child. His educational attainment is 1st year high school. Accordingly, upon arrival in the Metro, he stayed with his auntie in Harapin ang Bukas, Mandaluyong City however, he stay in the street most of the time because of vending cigarettes, candies, bottled water and Sampaguita along Crossing, Edsa. He said he earns as much as 300 pesos a day from selling Sampaguita with just 80 to 100 pesos in capital. He says he is happy with his work, explaining that he enjoys selling to drivers.

Daniel has engaged to different vices while in the street. He does not want to stay in the given address because accordingly, "Mahirap makisama sa kamag-anak", then he decided to stay in crossing where he is living right now. He sleeps in an eatery/bakery. He often has to wait until all cooking work is finished at around one o'clock in the morning each day before he can settle in. He explained

that he is allowed to sleep there because the people running the bakery know him. Asked if he wanted to return to his hometown, Daniel said he had no immediate plans to do so. He explained that it was more difficult to earn a living in his province than it is here in Metro Manila.

Client was referred several times to Jose Fabella Center by MMDA during their operation along EDSA. He was first brought to JFC in 2007. The last time he was brought there was March 2010.

Manuel, 45 years old, came from Ormoc City; He already had his own family in Ormoc and had finished his first year vocational course before he came to Metro Manila. He was recruited to work here in a factory worker in 2003 and, at that time, he stayed with a town mate in Bautista, Valenzuela City.

After the end of his contract, he started loitering in the streets to look for another job but to no avail. Eventually, scavenging became his main source of living even as he continued to look for other job opportunities to support his family in province. It has been five years since he has been engaged in paid employment. Most of the time, Manuel stays in the vicinity of the PICC, at EDSA, at Luneta and at Baclaran, Pasay City.

He has been referred to RAC-Manila and Jose Fabella Center several times. The last time he was brought to JFC was in March 2010.

Claudine, 18 years old, finished her grade school in Masambong Elementary School. The client lives with her biological family in Quezon City. Her father works as a construction worker and her mother is a housewife. She is the 2nd of eight children in their family. Her boyfriend, Jeffrey, lives with his family in Cubao, Quezon City. Asked why she'd rather hang out with Jeffrey in the streets when they have their respective homes, Claudine explained that she prefers this to avoid being the subject of rumors and intrigues about her being in a relationship at a very young age. And at the same time, she accompanies Jeffrey in his work as a jeepney/taxi caller. She admits to sniffing rugby and solvent, smoking cigarettes, drinking liquor and smoking marijuana. She has reportedly experienced miscarriage twice while on the street. Presently, she is two months pregnant to her boyfriend.

The first time she was brought to JFC was in 2007. She has been brought to JFC three times. The last time she left JFC was March 2010.

Allan, 40 years old, is a native of Tabacco City. He has one child with his estranged wife. He came to Manila on 2007 to work as a construction worker. He was then living with his cousin in Pinyahan, Quezon City.

Presently, client stays near the Land Transportation Office (LTO) in Quezon City and in Aurora Boulevard, Cubao. He scavenges for a living and said

that he was watching TV, apparently on a shop window, when he was rescued by the MMDA. Aside from the Jose Fabella Center, he has been referred several times in RAC Quezon City. He was first brought to JFC in 2009. He has been in and out of JFC for two times now. The last time he was at JFC was in March 2010.

Melody, 23 years old, born finished third year high school in Tenejeros National High School, Malabon City. She is the second of six children in their family. Her father works as a construction and her mother is a housewife.

She left their home in Malabon and decided to live with her boyfriend in Tulay, Balintawak when she was 16 years old. After a year, she left her boyfriend and started to loiter around Cubao, the PICC Complex and Crossing. She admits to sniffingrugbyand solvent, smoking marijuana and cigarettes and drinking liquor. She has had three miscarriages. Presently, the client is two months pregnant. She is staying with her boyfriend in Crossing, Ortigas.

She has been admitted to Bahay Bagong Buhay Rehabilitation Center in Taguig City and has been referred to other centers like RAC-Manila and RAC-Quezon City several times. The first time she was brought to JFC was in 2009. Since then, she has been brought to JFC 6 times; the last time was in March 2010.

Robert, 20 years old, with postal address at Sta. Ana, Manila, finished Grade 5 in Paco, Manila. Robert was the younger of 2 children in the family. His parents were said to have separated when he was 5 years old. At the age of 11 years old, he and his brother started to loiter the streets and engaged in various street activities like gang wars, sniffing of rugby and solvents, smoking marijuana and snatching.

He has been referred to a number of institutions/centers in Metro Manila like RAC-Manila, RAC-Quezon City, RAC-Pasay and the Bahay Bagong Buhay Rehabilitation Center in Taguig City but he has managed to escape. He was admitted in the Jose Fabella Center last 2004 for one month aftger which he was returned to his biological mother. After then, he left their home again and he now stays with his friends at Crossing, Ortigas where he met Melody and become his live-in partner. The couple is living in Crossing, Ortigas together with their friends. They work as a jeepney/taxi caller and engage in begging and scavenging for a living.

What we find here is that we are dealing with a group of people who work and live in the streets. They are not on the streets on a temporary basis. For most of the participants, homelessness does not constitute a single and isolated episode in their lives. Homelessness forms a big part of their lives and represents the bulk of their life experience, A number of them have been living on the streets for many years, some for the better part of their lives. For many of them, the street

is the only place that they know. It is in the streets that the little significant others that they have in their lives can be found. It is in the streets where their economic and social networks exist. To take them out of the streets would be like taking the proverbial fish out of the water. This fact has a direct bearing in relation to the question that is the focus of this study. In looking at how repeatedly rescued clients of JFC find their way back to homelessness, we shall look at the circumstances in which the participants last left the Center and their account of how they found themselves back in the streets.

Experiences at JFC and After

This study which examines how repeatedly rescued clients find their way back to homelessness looked into (1) the previous experiences of repeatedly rescued clients at JFC and the circumstances in which they last left JFC, (2) how they eventually ended up back in the streets, and (3) the factors that help them keep off and on the streets. We will consider each of these three themes.

Experiences at and Their Last Referral to JFC

In line with the objectives of the research, we explored the history of their rescues, the circumstances of their most recent rescue and their experience in the custody of the JFC during their most recent referral. Rescue operations are done daily by the MMDA with two teams roving around Metro Manila. It is thus possible for someone to be picked up a number of times within a single week. Since the study was meant to focus on some of the most repeatedly rescued clients of JFC, one of the most relevant questions we needed to ask the participants was how many times they have been taken by the MMDA and brought to the JFC. Of the 10 clients, three were rescued twice, one had been rescued thrice, two were at JFC for the fourth time, another two were six times already and two could no longer recall how many times they have been there.

It seems that most of them were taken by the MMDA as they were attending to their daily business. Asked what they are doing when they were rescued by the MMDA, seven out of ten said that they were sleeping or resting in a public area such as along the street, under a train station or in sidewalks. Three were preparing a meal in their makeshift living quarters when they were accosted by MMDA staff.

They appear to have developed an unwritten working arrangement with the MMDA staff with regards to their rescues. Most of them said that they went with the MMDA staff without putting up a fight out of 'pakikisama'. As Benjie, 22 narrated: *...may kusa na kami, hindi na kami nagpapahabol para makisama din sila sa amin, para hindi sirain yung mga gamit namin* (... we just cooperate, we do not make them run after us so that they will be considerate, so that they won't

destroy our property'). Minimizing loss or destruction of property seems to be an important motivation. *'Dati tinatakbuhan namin yan ngayon hindi na kasi kukunin nila ang mga gamit naming, yung tarima namin'* (Before, we used to run away from them but now we no longer do so because they will get our things, our makeshift houses), said Claudine, 18. Some of the rescuers reportedly ask them to cooperate explaining that it wouldn't be too much trouble to them. *'Sumama ka, palalabasin naman kayo mamaya'* (come with us, you will be released a little later), Sebastian, 32, quotes one MMDA staff as saying. Some of the respondents also want to go with the rescuers because they can take a bath at JFC and roam around the area.

Based on the accounts of the participants, most of their stays at the center were as short as four hours but the longest stay was up to three years. Two of the participants were first rescued in 2005 and they stayed in the center for nine months. The extent of client's stay in the center depends on the assessment of the social worker on the case and the needs of client. But for virtually all of the participants, especially those who have been referred to JFC for more than two times already, the average stay in JFC was a little over a couple of hours. Seven of the participants reported staying in the center for just a few hours in their last rescue and admission to JFC before being allowed by center staff to leave. For them, it was not even so much of an admission as a temporary stay. They would be asked to give their names and some basic information, made to sign a document and allowed to go shortly thereafter. No substantive form of intervention is given.

From this information, we can say that the study participants represent the range of backgrounds that could help us in achieving the research objectives. These ten participants, with six of them having been referred to JFC by the MMDA for at least four times, can indeed be considered as repeatedly rescued clients. These are people, who have had a reasonable amount of contact and experience with JFC to provide insights that can help us answer the research questions,

Leaving JFC and Finding Their Way Back Home

As explained earlier, the focus of this research is the critical sequence of events between the times they last left the JFC until they found themselves back in the streets. Among the relevant questions would be: Were they discharge or did they abscond? How long did it take for them to find their way back to the streets? We asked the participants to give an account of their last discharge from JFC.

The length of time between the last time they were referred to JFC and their current stay varied greatly among the participants. The duration varied from as little as two days up to six years. Of the 10 participants, four were last rescued just two days before they were again brought to the center by the MMDA, It took about half a year for two of the participants to be returned to the Center. It took at

least one year and up to six years for the other four participants to return after their last discharge.

As reported by the participants, all of them were properly discharged by the center, at the instance of social workers. 'Discharge' may not be the appropriate term considering the very limited time they spent there and the absence of any substantive intervention given by the center in their last stay at JFC. As indicated earlier, virtually all of the participants were merely interviewed by the assigned social worker at JFC who immediately recognized them as repeatedly rescued clients and authorized their immediate release from the center. They were not, as pointed out, even admitted to the center. Some of them, however, were provided with clothes and foods before they were let go. All of the participants went out of the center on the day that they were taken in and with the same companions that they came in with. As will be elaborated a little later, for all but one of them, there were no plans and prospects for proper shelter arrangements when they left the center. Just one participant was discharged that with plans to have her reintegrate with her family of orientation.

The participants were also asked to give an account of how they ended back in the streets after their last discharge from JFC. Based on their own accounts, most of them went straight back to streets upon leaving the center. As has been shown earlier, the streets have become home to virtually all of them. It is there that they have set up their makeshift homes and sleeping areas in various nooks and crannies such as vacant areas or under train stations. They are there for a good reason - the streets are their main source of income. As explained by Allan,⁴⁰ *'Sa may LTO dun po ako nangangalakal, kasi may kinukuhaan akong restaurant sa may Timog. Ako po ang kumukuha ng basura nila'* (At LTO, that is where I do my trade because there is a restaurant in Timog where I get stuff. I am the one who takes their garbage). Most of them scavenge the busy streets of Metro Manila to find valuable materials that can be recycled and sold to junk shops. Some of them also work as 'barkers' calling for passengers in jeepney terminals. The fact that their main source of livelihood is in the streets makes for a very compelling reason for the participants to go straight back to the street upon leaving the JFC. The lone participant who was reintegrated with her family after her last stay at the JFC ended back in the streets after a few months because her boyfriend/partner works there.

Majority of the participants went back to the streets within an hour or a day after they left JFC. Of the 10 participants, only one had a proper home to go to and stayed there for six months before being found again in the streets by the MMDA. She said she walked from Mandaluyong to her parent's house in Muñoz, Quezon City. Also with no money in hand, one other participant walked for three hours to get back to his street home in Intramuros, Manila. The literature pointed to the relevance of substance abuse, disability, housing and income support to the issue of chronic homelessness. These themes will be examined in the next section.

Factors That Help Keep Them Off and On the Streets

In our review of the literature, we found that disability and substance abuse often accompany chronic homelessness. It is argued that those who suffer from substance abuse and/or some form of disability, usually mental, are often at risk of being chronically homeless. It was also noted that housing and income support are two of the most important interventions that can help people break away from chronic homelessness. In the absence of income source and access to housing, it is very difficult for people to escape from homelessness. Thus, we considered these factors in our examination of the experience of the participants.

The clients were asked if they had concrete plans for a permanent or semi-permanent housing/shelter, only one had a particular place in mind. Claudine, 18 said she planned to go home to her grandmother's house. Five of them only had a general plan of going back to the province when they have earned enough money to do so without clear prospects for a reliable source of living. Four of them absolutely had no plan or prospect for a proper housing or shelter.

Those participants, who considered going back to their family or relatives, were bothered by various concerns such as how their relatives will take their current situation with them being jobless and economically unproductive and how they will fit in the household. As Allan, 40, explained: *'Ayaw ko nang tumira sa tiyahin ng nanay ko., Mas masaya kasi sa labas kaysa tumira sa mga kamaganak kasi, kung wala kang trabaho, makakarinig ka ng salita at dadabugan ka' (I don't want to live with my mother's aunt. It is better to stay out in the street because, if you have no job, you will get reprove and they will have it known to you).*

Since the literature pointed to disability as a relevant factor in homelessness, the participants were asked if they suffered from physical and/or mental disability at the time of the interview or during a previous stay in the center. Based on self reports, eight of them did not and never had suffered from any form of notable physical nor mental disability. One participant indicated that he was suffering from a slight sight impairment which he attributed to old age while another admitted that he suffered from some sort of psychological problem years ago. It was for this reason that he was taken to JFC but, according to him, he has since recovered from the illness although he still sometimes experiences relapses.

To explore substance abuse among the participants, they were asked if they were engaged with any form of vices such as the use of illicit substances such as drugs, rugby, acetone, marijuana or excessive alcohol drinking. Of the 10 participants, three admitted that they were addicted to alcohol, five said they were addicted to illicit substances mainly with the use of rugby, and one participant said he used both alcohol and drugs. As far as the interviews went, it did not appear to the researchers that the participants were under the influence of a particular substance to the point that they were debilitated. According to their reports, they

only engage in the use of these substances when they can afford to do so. Jose, 18, indicated: *'Nagrurugby po ako dati pero minsan na lang po...isang beses sa isang lingo pag may pera'* (I used rugby before but only occasionally now...once a week if I have money).

As discussed earlier, majority of the participants went straight back to the streets immediately after they last left the center. We asked them what pushed them back into the streets and basically all of them had the same answer. All the 10 participants indicated that the main reason they went back to the street is that it was their main source of livelihood. It is only in the streets that they can carry out their work as barkers, parking attendants, and scavengers. And it is only these kinds of jobs that they know how to do or, at least, they have an opportunity to do. While a couple of them have skills and have experience in construction work, they know of no such work that is available for them. With this, the streets provide them with the means to meet their basic needs. It is in the streets that they find food and, for many of them, it is the streets that offer space they can use as shelter. They would most likely not be able to put food on the table, so to speak, doing the things they do somewhere else, much less the provinces which, to some, may seem like an obvious choice for those who have difficulty making it in the big city. Thus, they have made the streets their home.

And over the years that they have made the streets their home, it has become their community. It is in the streets where they have established friendships. It is in the streets where their social network and peer support can be found. For them to be taken out of the streets would be to isolate them from the web of relationships and contacts that make up their life and make life possible. And it is not merely out of whim. Most of them started out without a family. Eight of them have no houses to return to. Only two of the participants have relatives they might be able to live with except for the fact that they have difficulty earning a living and for which they will be taken to task if they lived there. For most of them, it was the streets that offered them a chance in life – an abode and whatever little opportunities they have now. *'Wala po kasi akong mauwian...at sa kalsada po ako nagkakaroon ng kaibigan'* (I have no house to come home to... and it is in the street where I find friends), Alvin,20, relates.

Asked what kind of support can be extended to them to help keep them off the streets, a number of the participants had very practical ideas. Six of the participants cited the need for assistance in gaining employment with skills that they already have and skills they can gain from some skills training program. One of the younger participants was open to the idea of going back to school. Not surprisingly, some of them dream of having their own house. It is not really too grand a dream. As Sebastian, 32, says, all he wants is a *"Simpleng buhay lang, may trabaho at matitirhan"* (Just a simple life, with job and house).

One participant placed his hopes in being able to return to his hometown sometime in the future. He said he wanted to go home and start new life with his

own small business to support him. Another one was still clinging unto the hope of being able to find his parents. But two of them seem to have given up on dreaming of a better life. They said that they do not have plans in life, with Benjie, 22, saying 'Paanod-anod lang ang buhay ko...bahala na bukas..wala akong plano para sa kinabukasan' (I go with the flow of life, wherever life would take me, I do not have plans for the future).

ANALYSIS

The foregoing section presented what we found about the participants' experiences with homelessness and how these repeatedly rescued clients of JFC ended back in the streets after their last discharge from the Center. In this section, we will consider what all these findings tell us about the central question of this study which is how repeatedly rescued clients find their way back to homelessness.

First, let us review the factors that pushed the participants to be back into the streets. Chief among those cited by the participants was that the streets provided them with income. Repeatedly rescued clients work in the streets as street vendors, barkers and scavengers. Despite the risks of staying in the streets, this has been a viable way of life to these people. With the streets providing them a source of income, they derive from it some of their most basic needs in life: namely food and drink. And given pragmatic considerations, it is in the streets that they have found their shelter and their home. They try to make their life in the streets as comfortable as possible, to the extent that their resources and their environment allows them to. And as years go by, it is in the streets where they form friendships, find a place in a community and build a social network that becomes their main source of support and their main reference for survival and living. In the absence or with the loss of family ties, it is in this process, described by Grisby, Bauman, Gregorish and Roberts-Grey (1990) that they are acculturated to a way of life. This ultimately shapes their social reality and life world (Alcazar (2001).

We can all talk about the virtues of having a proper shelter and staying off the streets but the fact is that their survival so far has been on account of them being on the streets. Understandably, they would rather risk health, life and limb working and living in the streets than live in want off the streets. And so, in a sense, their decision to stay and work in the streets to make both ends meet is a manifestation of their strength and their will to survive. It is an embodiment of a coping ability that social workers instill in people who needs help. And yet they have this strong will to survive, apparently yet unbroken despite the untold hardships they have face in life and in spite of how their life on the streets is made more difficult with the apparently constant disruption that MMDA 'rescues' bring to their lives, .

This was also explored by Alcazar (2001) when she adopted a phenomenological approach in exploring how street dwellers in a certain section of one of Metro Manila's main thoroughfares constructed their social reality and their life world.

A key finding is that while the repeatedly rescued clients of JFC were all formally discharge from the center, they were not provided with any substantive intervention. Some were provided with food and clothing and some were not, but there was no critical intervention in areas suggested by the literature which is in terms of income support, housing support as well as in terms of addressing substance abuse issues. Of course, the judgment over what services to provide, if any, depends on the assessment of the social workers. But it appears that it has become a standing policy of the Center not to admit repeatedly rescued clients to the center.

The decision not to provide any form of institutionalized intervention appears to be based on the social workers' appreciation of the profile of repeatedly rescued clients. Virtually all the participants covered by this study were all physically and mentally-able. They were effectively able to take care of themselves and meet their basic needs, hence the conclusion that they do not need temporary institutional care and other further helping intervention as what is provided by the Center. It was the Center's social workers themselves who articulated this.

The stance taken by JFC staff towards this group of clients implies that they feel no obligation to provide services and look after the needs of such population, perhaps thinking that they constitute a group that is beyond the Center's mandate. But, it can also be argued that these cases still form part of the Center's mandate as suggested by the fact that the MMDA refers these clients to them. In any case, clients are brought to the Center and leave it without getting anything out of the experience, perhaps except for the loss of time and earning opportunities. They are discharge from the Center with no plans nor any form of support to help keep them off the streets. As pointed out, discharge may not even be the appropriate word since these so-called clients are never really even admitted to JFC in the sense that they are provided homelife services and other form of intervention. But by doing so, the Center also preempts any opportunity for responding to the needs of this population.

Thus, it is not surprising that these repeatedly rescued clients end up right where the MMDA pick them off. Majority of the clients went back to the streets within an hour to 1 day after being released from the center. Of 10 participants, only one went back home and stayed with family for up to six months. As noted from the literature, the provision of income support and supportive housing are some of the most vital interventions needed by homeless people to be able to stay off the streets (Burt et al.,2004;Ji 2006; LenMac Consulting 2005). And the absence of these factors in nine out of ten of these repeatedly rescued clients

virtually assured the recurrence of homelessness. In the absence of an alternative income source and alternative living arrangements, clients had nowhere to go but back to the streets where they came from and where, they know, they can obtain their basic needs. The absence of an alternative income source and the concomitant absence of access to decent housing among this population played a great role in leading them to the streets. As a result, the streets have become their source of life and their home. More than the makeshift houses made of carton and tarpaulin, the streets represent for them a key resource for survival as it offers them what they need to survive. Their periodic rescue off the streets by the MMDA provides them with no viable options to support their need for shelter and livelihood. The rescues of the MMDA temporarily out of the streets but do not respond to the fundamental reasons as to why they are there: livelihood and shelter. Though the articulate principle behind rescues is to help them out of the hazardous way of life in streets, to the intervention as a whole does not respond to their most basic and immediate needs of livelihood and shelter.

Given this, there appears to be a need to revisit the purpose and examine into the wisdom of taking these people out of the streets as what the MMDA's rescue operations effectively do. As has been noted, most of the clients are in the streets for a good reason: to earn a living. The streets are their primary source for their daily needs. In what way, then, does the MMDA's so-called rescue operation help them? Are they being helped every time the MMDA picks them off the streets and brings them to JFC only to be released hours later without any substantive intervention? To what extent do these rescues by the MMDA do them harm in how they are taken away from their business of earning a living, their merchandises are confiscated, and their meager property destroyed or taken? We, of course, should acknowledge the beneficent intent of the MMDA's actions. It can and has been argued that such rescues promote the safety of homeless people by taking them away from the hazards of the streets while helping them meet their needs. But the insights we have gained from this study requires us to rethink the adequacy and appropriateness of the present response of the MMDA to the problem of homeless street dwellers. If the objective is simply to temporarily remove homeless street dwellers from the streets of Manila for aesthetic purposes, we can say that the MMDA's rescues do just that. But if the objective is to help these people find life beyond the streets, the rescues will not suffice and may in fact be detrimental to their interests.

Of the very few who took a year or more before being referred back to the JFC, it was not that they were off the streets. Based on their accounts, they were in the street for most of that time. Some were only lucky enough not to be 'rescued'. Others were 'rescued' but ended up in some other institution. Most of those who did not come back to JFC sooner were in the streets. For virtually all of them, living in the streets has become their life, for better or for worse.

The cases included in this study appear to represent a different form of homelessness and a different realm of work than those reflected in the literature

reviewed. While the literature closely linked chronic homelessness with disability of various forms, this does not seem to be the case of repeatedly rescued clients of the JFC. Virtually all of the participants in the study manifested no serious impairment in their physical and mental functioning as to be a cause of or contributory factor to their being homeless. We can infer from the study that disability does not go hand-in-hand with homelessness in the case of the repeatedly rescued clients taken by the MMDA from the streets of Metro Manila.

One area that was not explored by this study but is recognized as a relevant issue is resilience. Homelessness, according to the literature, may have something to do with different abilities to cope or different levels of resilience. Conceivably, other people may not have survived the kind of adversity that these 10 people suffered. Where did they draw their will to survive? This study did not explore this area because it is not directly related to the research problem but an exploration of this subject may offer useful insights to our understanding of repeatedly rescued clients and of homeless people in general. This can therefore be a matter to be explored in future research.

The study does bear out what the literature says about the value of supportive housing and income support as essential elements for effective intervention in keeping the chronically homeless off the streets (Burt et al., 2004; Ji 2006; LenMac Consulting 2005). We know that they are in the streets for the main the reason that they derive their means of livelihood there. When asked what kind of support would be useful in getting them off the streets, most of the participants identified employment and livelihood as a key issue. If repeatedly rescued clients are to leave the streets, they need to have a viable alternative for making a living. For some reason, the repeatedly rescued clients seem to clearly know what authorities apparently fail to grasp when they say that they are rescuing them: their means for a living and their lives are in the streets.

Given the fact that majority of repeatedly rescued clients live off the streets, interventions should address their need for income that can afford them proper shelter and food. Otherwise, repeatedly rescued clients will remain so no matter how many times the MMDA rescues them.

CONCLUSION AND RECOMMENDATIONS

This study explored the question of how repeatedly rescued clients find their way back to homelessness. The most repeatedly rescued clients who participated in our study were found to be in the streets because it is there that they earn a living through vending, scavenging, serving as parking attendants or as barkers for public utility jeepneys. With their source of living in the streets and in the absence of accessible housing facilities nearby, they have learned to live in the street, taking whatever space is available for them to call home. A key and unexpected finding in this research is that repeatedly rescued street dwellers are

not actually admitted to the center and are therefore not given any substantive form of intervention. After brief intake interviews to gather basic information from them, the most significant provision such persons receive from JFC may just be a meal and some clothing and, even then, not everyone gets these every time they are brought there.

Based on the accounts of the participants, they have an unwritten agreement with JFC and MMDA staff that rescues are short visits to the Center where they will be released a few hours after. Leaving the Center without any form of substantive intervention, the clients end up directly going back to where they were taken from. In a sense, MMDA rescues constitute an iterative interruption in the clients' day-to-day life with no meaningful service or support gained from neither the MMDA nor the JFC.

In view of the findings, there is an apparent need to review the MMDA's Metro Gwapo project and DSWD's program response to repeatedly rescued clients. The rescue operations are conducted by the MMDA as part of its Metro-Gwapo campaign. The Metro Gwapo campaign represents an effort to fulfill the agency's mandate of fostering development, public safety and improved traffic in Metro Manila. The rationale for the program is couched in noble terms. The campaign is supposedly meant to create a more positive outlook and engender productivity by improving the environment and removing elements that evoke negativity. What is not being said is how people working and living in the streets are seen as an unwelcome element in the sense of order that administrators want to cultivate for Metro Manila through the Metro Gwapo project.

But to what extent should conceptions of public order be placed before the welfare of some of these most vulnerable and excluded members of Philippine society? These people are in the streets to make a living. Every time they are taken off the streets in these daily drives, they are deprived of precious opportunity to be economically productive. If the object is simply to take them off the streets as a public order measure, then let it be recognized as such. The fact is, these rescue operations do not contribute in any significant way to the improvement of the lives of these street dwellers. If indeed there is an intent to contribute positively to their lives, we offer the following recommendations:

1. Review of the policy/guidelines of the Metro Gwapo Project of the MMDA to assess the appropriateness of the project in addressing the problem of persistent homelessness among street dwellers;
2. Review the operating procedure of Jose Fabella Center to enhance the center's ability to respond to the needs of repeatedly rescued clients. This may require the re-examination of the admission policy of JFC, revision of the operational manual, upgrading of skills of personnel to improve delivery of services, development of collateral linkages in assisting the clients, and increased budgetary support for the center;

3. Develop projects that can respond to the needs of homeless street dwellers. One possibility is the provision of halfway homes which can be their safe haven during night time for those working in the streets. Halfway homes like the Gwapotel with an infusion of a social work intervention by providing development sessions such as values formation and skills training which they will use for capability building.
4. Provision of skills training or livelihood trainings to improve their access to job or income opportunities. The training skills to be provided should consider the existing demand for employment and the capacity of clients so this will give them opportunity to compete with the market.
5. Formalize partnership through a Memorandum of Agreement with MMDA and other intermediaries in the conduct of rescue to transients and mendicants to sustain provision of more appropriate response to the needs of these clients.

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