

DOCUMENT RESUME

ED 276 799

UD 025 255

**TITLE** Homeless Families: A Neglected Crisis. Sixty-Third Report by the Committee on Government Operations together with Dissenting and Additional Views.

**INSTITUTION** Congress of the U. S., Washington, D. C. House Committee on Government Operations.

**REPORT NO** House-R-99-982

**PUB DATE** Oct 86

**NOTE** 29p.

**PUB TYPE** Legal/Legislative/Regulatory Materials (090)

**EDRS PRICE** MF01/PC02 Plus Postage.

**DESCRIPTORS** Economically Disadvantaged; Family Problems; Family Programs; \*Federal Programs; \*Homeless People; \*Housing Needs; Low Income Groups; \*Poverty; Public Agencies; Welfare Agencies; \*Welfare Services

**IDENTIFIERS** \*Department of Health and Human Services

**ABSTRACT**

This report, based on a study by the Subcommittee on Intergovernmental Relations and Human Resources of the Committee on Government Operations examines the magnitude of the problem of homeless families. Its findings include the following: (1) causes of family homelessness include scarcity of low income housing, inadequate income or public assistance benefits, erosion of family structure and increased cases of personal crisis, and cuts in federal assistance programs; (2) emergency assistance programs are unable to adequately address the problem; (3) the Department of Health and Human Services (HHS) has failed to follow regulations on monitoring, reviewing and auditing the Emergency Assistance Program (EA); and (4) the shelter system for homeless families is destructive to families, harmful to children and may perpetuate long-term homelessness among families. The report recommends that: (1) HHS should follow its regulations to monitor EA; (2) HHS should use EA funds to develop model shelter programs; (3) States should use Federal emergency funding; (4) EA statistics should be used for counting numbers of homeless families; (5) homelessness must be declared a national emergency and receive immediate emergency assistance and long-term solutions; and (6) EA should be used to construct and rehabilitate emergency shelters. Dissenting and additional views are included.

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# Union Calendar No. 588

99th Congress, 2d Session - - - - - House Report 99-982

ED276799

## HOMELESS FAMILIES: A NEGLECTED CRISIS

### SIXTY-THIRD REPORT

BY THE

### COMMITTEE ON GOVERNMENT OPERATIONS

together with  
DISSENTING AND ADDITIONAL VIEWS



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WASHINGTON : 1986

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(11)

## LETTER OF TRANSMITTAL

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HOUSE OF REPRESENTATIVES,  
*Washington, DC, October 9, 1986.*

Hon. THOMAS P. O'NEILL, Jr.,  
*Speaker of the House of Representatives,*  
*Washington, DC.*

DEAR MR. SPEAKER: By direction of the Committee on Government Operations, I submit herewith the committee's sixty-third report to the 99th Congress. The committee's report is based on a study made by its Intergovernmental Relations and Human Resources Subcommittee.

JACK BROOKS, *Chairman.*

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# Union Calendar No. 588

99<sup>TH</sup> CONGRESS  
2d Session

HOUSE OF REPRESENTATIVES

REPORT  
99-982

## HOMELESS FAMILIES: A NEGLECTED CRISIS

OCTOBER 9, 1986.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mr. BROOKS, from the Committee on Government Operations,  
submitted the following

### SIXTY-THIRD REPORT

together with

### DISSENTING AND ADDITIONAL VIEWS

BASED ON A STUDY BY THE INTERGOVERNMENTAL RELATIONS AND  
HUMAN RESOURCES SUBCOMMITTEE

On September 23, 1986, the Committee on Government Operations approved and adopted a report entitled "Homeless Families: A Neglected Crisis." The chairman was directed to transmit a copy to the Speaker of the House.

#### I. INTRODUCTION

Under the House of Representatives Rule X, 2(b)(2), the Committee on Government Operations is authorized to "review and study, on a continuing basis, the operation of Government activities at all levels with a view to determining their economy and efficiency." The committee has assigned this responsibility, as it pertains to the Department of Health and Human Services (HHS), to the Subcommittee on Intergovernmental Relations and Human Resources.

Pursuant to its authority, the subcommittee conducted an oversight investigation of the Emergency Assistance Program (EA) of the Social Security Administration (SSA), an agency of HHS. In 1967, Congress amended Title I of the Social Security Act to establish EA as a component of the Aid to Families With Dependent Children Program (AFDC). EA was intended to respond expeditiously to the immediate and emergency needs of destitute families

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in ways AFDC, which has a lengthy, burdensome application process, could not. Like AFDC, EA is managed by State public assistance departments.

When the Senate Finance Committee issued its report upon the authorization of EA, it noted: "The Committee understands that the process of determining AFDC eligibility and authorizing payments frequently precludes the meeting of emergency needs when a crisis occurs. In the event of eviction, or when utilities are shut off, or when an alcoholic parent leaves children without food, immediate action is necessary." The report added that amending Title I was intended to "encourage public welfare agencies to move promptly and with maximum effectiveness in such situations."

EA is an optional program. States receiving Federal public assistance payments are not required to participate in EA; however, States which choose to receive EA funds are required to provide assistance to all eligible families within their jurisdictions. EA is a matching program, funding 50 percent of the costs of State emergency aid programs. The remaining 50 percent of EA expenses are the responsibility of the State.

Each State participating in EA establishes eligibility criteria for the program. Although the States have broad flexibility in setting criteria, they must adhere to the following minimum Federal requirements:

1. Funds are available only on behalf of a needy child under the age of 21 and any other member of the household in which he or she is living.
2. Such child must be living with relatives in a place of residence maintained by one or more responsible relatives, or had lived with the relatives within 6 months of the application for assistance.
3. Such child is without resources immediately accessible to meet his or her needs.
4. The emergency assistance is necessary to avoid destitution of such child or to provide living arrangements for the child in a home.
5. The child's destitution did not arise because he or she, or a responsible relative, refused, without good cause, employment or training for employment.

Today 28 States and jurisdictions operate EA programs. In 1981, EA benefits totaled \$125 million. In 1985, the amount rose to \$156 million, and SSA expected EA payments to reach \$161 million in 1986. SSA paid half these EA costs.

As part of its continuing investigation of the Federal response to the homeless crisis, the subcommittee reviewed EA to determine the effectiveness of its management and whether the program was in adherence to applicable Federal laws and regulations.<sup>1</sup> The subcommittee also examined the magnitude of the problem of homeless families.

<sup>1</sup> On April 18, 1985, the committee published its first report on the subcommittee's investigation, "The Federal Response to the Homeless Crisis," House Report 99-47. The subcommittee conducted hearings on homelessness in Washington, D.C., October 3, 1984, New York City, November 20, 1984; and Los Angeles, December 18, 1984.

The subcommittee's review included the inspection of EA records at SSA and the examination of private studies prepared by State and local government agencies. Subcommittee staff also reviewed material prepared by academic researchers, private advocacy groups, and shelter providers.

The subcommittee conducted a hearing on March 19, 1986. Witnesses at the hearing included SSA's Associate Commissioner for Family Assistance, representatives of the U.S. Conference of Mayors, an attorney for the National Coalition for the Homeless, shelter providers and members of homeless families.

## II. THE CAUSES OF FAMILY HOMELESSNESS

### 1. SCARCITY OF LOW-INCOME HOUSING

In its 1985 report, "The Federal Response to the Homeless Crisis," the committee identified the scarcity of low-income housing as the leading cause of homelessness for individuals. The report stated:

... the scarcity of low-income housing appears to be the main cause of homelessness. Poor people simply cannot afford the majority of available housing in the United States. The low-income housing supply is dwindling due to such factors as urban redevelopment, condominium conversions, decreased construction, increased demand from higher income renters and the virtual elimination of Federal funds from the construction of low-income housing.<sup>2</sup>

The shortage of affordable housing is also the main cause of homelessness among families. Families are a large percentage of the two and one-half million people who are displaced from their homes every year as a result of eviction, revitalization projects, economic development plans and spiraling rent inflation. While rents increase beyond reasonable costs, a half million units of low-rent dwellings are lost each year as a result of condominium conversions, abandonment, arson and demolition.<sup>3</sup>

The national housing shortage may exceed 1.7 million units by 1990.<sup>4</sup> In Boston, site of the first comprehensive study of homeless families, only 2 percent of apartments rent for less than \$300 a month. Families registered with the Boston Housing Authority will have a minimum 2- to 3-year wait, and many will wait up to 12 years for housing. Even after such a long wait, available housing is substandard, temporary or excessively costly.<sup>5</sup>

Local housing shortages are compounded by the Federal Government's withdrawal from its commitment to build subsidized housing. A low-income housing specialist testified that the Federal Government:

<sup>2</sup> House Report 99-47, April 18, 1986, p. 3.

<sup>3</sup> *Ibid.*

<sup>4</sup> Hearing before a subcommittee of the Committee on Government Operations, House of Representatives, "Emergency Aid to Families Program," March 19, 1986, hereinafter referred to as Hearing Testimony of Ellen Bassuk, M.D., associate professor of psychiatry, Harvard Medical School, p. 73.

<sup>5</sup> *Ibid.*

Is mounting a full scale retreat from the housing role it began to assume during the New Deal and has followed, however inadequately, over the last 50 years. Direct provision of housing for low- and moderate-income households, through Federal Government aided construction and rehabilitation programs, has come to a virtual halt. In 1985, only 5,000 units of conventional public housing were funded and the proposed fiscal year 1986 budget contains a 2-year moratorium on all additions to the subsidized housing stock.<sup>6</sup>

The shortage of low-income housing in the U.S., while dealing a devastating blow to poverty-stricken individuals in general, has an even greater impact on homeless families. Individuals can still rely to a limited extent on single room occupancy (SRO) units, even though the nation has lost more than 50 percent of its SRO stock in the last ten years. However, the housing needs of families are different and more expensive, and SRO's are simply not suitable for families. Therefore, homeless families have even less shelter available to them than homeless individuals, which renders families at greater risk of displacement, and provides them with less opportunities to recover from homelessness.

## 2. INADEQUATE INCOME OR PUBLIC ASSISTANCE BENEFITS

In 1970, one in 10 U.S. families were headed by females. By the year 2000, projections indicate that one in five U.S. families will be headed solely by females. Half of the female-headed families live below the poverty level.<sup>7</sup>

As divorce rates climb, and the numbers of single mothers and teenage pregnancy increase, the homeless family population will continue to grow. A large majority of female heads of households are untrained and unskilled. When they are eligible for employment, they only qualify for jobs that do not pay enough to support a family. The combination of low income and exorbitant housing can make sustaining quality of life impossible for many single women with children.

The Boston homeless family study found that 85 percent of Massachusetts' homeless families are comprised of a single mother with 2.4 children.<sup>8</sup> The majority of these families were receiving AFDC benefits, but the level of payments was not sufficient to prevent homelessness. Between 1969 and 1980, AFDC benefits failed to keep pace with the inflation rate, lagging behind by approximately 56 percent in real dollars. In 1985, the poverty level for a family of three was defined as \$8,850. Yet AFDC cash benefits combined with food stamps fell well below this level, at \$7,000.<sup>9</sup>

Dr. Ellen Bassuk of Harvard University, director of the Boston study, testified before the subcommittee that "The facts speak for themselves. Without an external support network and an adequate, reliable source of income, it is virtually impossible for many fami-

<sup>6</sup> Ibid. Testimony of Jetta Bernier, executive director, Massachusetts Committee for Children and Youth, p. 80.

<sup>7</sup> Ibid. Bassuk testimony, p. 73.

<sup>8</sup> Ibid.

<sup>9</sup> Ibid.

lies to avoid homelessness, even with governmental or social aid."<sup>10</sup>

The U.S. Conference of Mayors reported that local governments have identified insufficient public assistance benefits as a major cause of the increase in homeless families. A report by the Conference cited the concerns of local officials:

Yonkers officials stated: "Federal and state entitlement guidelines are set unrealistically low and do not afford poor families enough money for both food and rent. Many families fall behind on their rent and become homeless; but most simply go hungry. Eighty-four percent of the people using the Hudson Place Soup Kitchen report missing meals because of lack of money, and they report missing an average of over 29 meals each month."

Seattle officials report that "public assistance and food stamp allotments have not adequately kept up with inflation. Cash assistance grants simply do not meet housing, utility and food expenses." Similarly in Detroit, "food stamp and other public assistance entitlements have not kept pace with inflation."

Related to low benefits are specific problems with the Food Stamp Program . . . Cleveland cites "changes in the eligibility criteria for food stamps which discourage use." In Seattle "those who do not have permanent living arrangements do not qualify for food stamps. Thus, many transients have to rely on food banks in order to get food." Detroit officials point out that "current regulations make it difficult for those in need to qualify for assistance and in many cases, since outreach dollars have been cut, some may not even be aware that they are qualified."<sup>11</sup>

The inadequacy of public assistance benefits, coupled with the scarcity of low-income housing, deals a double blow to poor families. This combination of factors leading to homelessness is exemplified in Boston, where AFDC allots \$128 a month for housing at a time when the average rent is \$530 a month and housing costs are rising at an annual rate of 37 percent.<sup>12</sup>

### 3. INCREASES IN PERSONAL CRISES

The traditional family structure, on which individuals in past generations had relied to weather personal crises, has eroded, leaving family members with nowhere to turn during times of trouble. Although most homeless families studied cited eviction or the unavailability of affordable housing as the reason for their homelessness, one-third of the homeless families surveyed indicated that a personal crisis, such as a dissolved relationship with a man, battering, death, or illness had caused their state of homelessness.<sup>13</sup>

<sup>10</sup> Ibid., p. 74.

<sup>11</sup> "The Growth of Hunger, Homelessness and Poverty in America's Cities in 1985," United States Conference of Mayors, January 1986, pp. 7-8.

<sup>12</sup> Ibid., p. 9

<sup>13</sup> Hearing, Basuk testimony, p. 75.

With no support network on which to rely, these families, usually female-headed, become homeless very quickly.

Many of the women heading homeless families were themselves raised in broken homes. As a result, the women exhibit an inability to establish themselves autonomously. According to Dr. Bassuk, "Most had sporadic or nonexistent work histories, and no stable, reliable relationship or support. More than 50 percent of the mothers reported either no relationship or could name only one person with whom they had a relationship. Of the latter, many mentioned a recent shelter friend or a professional contact. More than 25 percent named their child as the major support."<sup>14</sup>

#### 4. CUTS IN FEDERAL ASSISTANCE PROGRAMS

Over the past decades, the Federal Government, through a myriad of assistance programs, had worked to build a safety net on which poor families could rely to prevent their fall from the lower edges of poverty into homelessness. In recent years, cuts in Federal programs and other factors have combined to create the largest number of homeless families since the Depression.

The U.S. Bureau of the Census found that 8 million Americans lived below the poverty line between 1979 and 1982. One of the major factors causing the increase in poverty, found the Bureau, "may have been the tightening of eligibility standards for certain government aid programs."<sup>15</sup>

According to the Congressional Budget Office, "the poverty rate was 15.0 percent in 1982, up from 11.4 percent in 1973, or an increase in the number of poor persons from 24.5 million to 34.4 million. In fact, the 1982 rate is the highest in 15 years."<sup>16</sup> CBO concluded that cuts in Federal programs such as AFDC and Food Stamps contributed to the increase in poverty.<sup>17</sup>

The committee found in 1985 that cuts in Federal assistance programs had been a major cause of the increase in the overall U.S. homeless population. The committee believes this finding also applies to the current increase in the number of homeless families.

### III. FINDINGS AND CONCLUSIONS

#### 1. EMERGENCY ASSISTANCE PROGRAMS ARE UNABLE TO ADEQUATELY ADDRESS THE PROBLEM OF HOMELESS FAMILIES

The homeless population is difficult to count. The only method used to measure the homeless population in the U.S. has been the surveying of private and public shelter providers. However, most homeless people do not use shelter services. Even if a reliable method to count the number of homeless persons who do not use shelters was devised, many of the homeless would not respond to street surveys because they are unable to do so. Moreover, homeless people are transient, and would be difficult to locate.

<sup>14</sup> Ibid.

<sup>15</sup> "Poverty Trends and Issues," the Bureau of the Census, October 18, 1983, p. 7.

<sup>16</sup> Statement of Rudolph G. Penner, Director, Congressional Budget Office, before the House Subcommittee on Oversight and the Subcommittee on Public Assistance and Unemployment Compensation of the Committee on Ways and Means, U.S. House of Representatives, October 18, 1983, p. 1.

<sup>17</sup> Ibid.

The two most widely quoted homeless population surveys contain figures ranging from a low of 350,000, estimated by the Department of Housing and Urban Development in 1984, to a count of 3 million estimated by the Community for Creative Non-Violence, a Washington, D.C. advocacy group, also in 1984.

SSA statistics may indicate that more than 100,000 family members a month are homeless in the U.S.<sup>18</sup> This figure is a total of only half the States and territories in the U.S. that participate in EA. The number for all States would be much higher, and would not include individuals who are homeless and not part of intact families.

Perhaps more meaningful than cold numbers are the stark sights that can be seen in the nation's largest cities. On any given night, observers can view masses of homeless people walking the streets or sleeping in public parks and train stations. At the same time, the public shelters in each of these cities are filled to capacity. Obviously, regardless of how large the homeless population really is, there are more homeless people than shelter beds.

In 1985, the committee reported that homelessness had been increasing in every city surveyed. The latest available information for 1986 indicates that the increase continues. For example, early in 1986, the U.S. Conference of Mayors released its survey of 25 large cities. The survey found that the demand for emergency shelter had increased in 90 percent of the cities surveyed, and had remained constant in the remaining 10 percent. The demand for shelter, the Conference reported, had increased by an average 25 percent across the country.<sup>19</sup>

In 60 percent of the cities surveyed by the Conference, emergency shelters routinely turned away homeless people because of insufficient beds or space.<sup>20</sup> In almost every city, officials expected homelessness to worsen, and no cities expected a decrease in the size of their respective homeless populations.<sup>21</sup>

During the 1980's, homelessness has been increasing by as much as 38 percent a year.<sup>22</sup> The fastest increase has been among homeless families. Families once represented a negligible portion of the overall homeless population, but now comprise nearly 28 percent of all homeless persons in the U.S.<sup>23</sup> Regarding this increase, the Conference found:

Ninety-one percent . . . indicated that the composition of their homeless population has changed in recent years. The most significant difference has been a growing number of families with children, with 85 percent of the cities indicating an increase among this group. Increases in two-parent families are reported by Denver, Detroit, Louisville and Saint Paul. Denver officials note there are

<sup>18</sup> According to SSA, EA serves 33,000 families a month. By multiplying that number by four, the approximate average size of a U.S. family, a total number of 132,000, is reached.

<sup>19</sup> Hearing, testimony of the Honorable Arthur J. Holland, mayor, Trenton, New Jersey, on behalf of the U.S. Conference of Mayors, p. 7.

<sup>20</sup> *Ibid.*

<sup>21</sup> *Ibid.*

<sup>22</sup> "Homelessness: A Complex Problem and the Federal Response." General Accounting Office, HRD-85-40, April 9, 1985, p. 10

<sup>23</sup> *Op. Cit.*, see footnote 11, p. 15

"more two parent families seeking shelter because of being unemployed or underemployed." Officials in Detroit and Kansas City indicate there are more women with young children who are homeless in those cities. In Boston, an average of 15 families become homeless every week. Families constitute the fastest growing group among homeless people in Phoenix. Chicago officials indicate "more families with children—families breaking down due to unemployment, stress, and abuse—are requesting shelter from the City." Other cities with increasing numbers of homeless families are Cleveland, Nashville, Salt Lake City, San Juan, Seattle, Trenton and Yonkers.<sup>24</sup>

Families comprise the majority of the homeless population in some cities. For example, families represent 80 percent of the homeless in Yonkers, New York, 66 percent of the population in New York City and 40 percent of the populations in Chicago and Boston.<sup>25</sup>

The Federal response to the plight of homeless families has been insufficient. The programs that had been used to prevent homelessness, such as AFDC and Food Stamps, have been unable to meet the need because of inflation and strict eligibility requirements.

The only Federal program specifically created to aid homeless families, EA, is used in only half the 52 eligible States and jurisdictions. Among the States not receiving EA funds are Colorado, Connecticut, Louisiana, Kentucky, South Carolina, Tennessee, Arizona and Utah.<sup>26</sup> Major cities in each of these States reported large increases in the numbers of homeless people. They include Denver, Hartford, New Orleans, Louisville, Charleston, Nashville, Phoenix and Salt Lake City.<sup>27</sup> With the exceptions of Hartford and Charleston, each of these cities also reported they were forced to turn homeless people away because they lacked sufficient shelter and food resources.<sup>28</sup> Nevertheless, their States have not opted to participate in EA.

States participating in EA are not required to use the program for all purposes allowed by Title I of the Social Security Act. Many of the States receiving EA severely restrict its use. Several States place limits on the amount of financial assistance available for homeless families.

The differences in the eligibility criteria from State to State are reflected in the numbers of homeless families served by each participant in EA. For example, New York and California have the largest homeless populations. Each State's largest city, New York City and Los Angeles, have approximately 40,000 to 50,000 homeless people, according to local surveys. Both States participate in EA. Yet New York, with more liberal eligibility requirements, provided emergency assistance to an average 4,473 families a month in 1985. California, with the strictest eligibility criteria in the coun-

<sup>24</sup> *Ibid.*, p. 16.

<sup>25</sup> *Ibid.*

<sup>26</sup> Hearing, testimony of the Honorable Ted Weiss, chairman, Subcommittee on Intergovernmental Relations and Human Resources, p. 30

<sup>27</sup> *Op. Cit.*, see footnote 11, p. 27.

<sup>28</sup> *Ibid.*

try, provided aid to an average 734 families a month.<sup>29</sup> Even less populated States such as Oklahoma and West Virginia served more families. A single city, Washington, D.C., also served more families under EA than the entire State of California.<sup>30</sup>

Most of the EA funds in California are used for abused children and runaways.<sup>31</sup> Destitute families in need of assistance, whose children are not abused or neglected, do not usually qualify for EA in the State. This situation, combined with California's AFDC requirements, has created a Catch-22 situation in the State which leaves homeless families with the options of either breaking up their family to qualify for aid, or receiving no assistance at all. The problem was explained by Gary Blasi, an attorney for the Legal Aid Foundation of Los Angeles:

The only emergency shelter in Los Angeles is that provided as an emergency benefit of the general relief assistance program. The general relief program is restricted to persons who are ineligible for every other kind of program. Thus, homeless families are denied emergency shelter in this county because they are theoretically eligible for AFDC.

Homeless families are told when they apply for general relief to go down the street and apply for AFDC. They are also told that they have to have an address in order to apply for AFDC, in violation of what I understand the Federal regulations to be.

If homeless families succeed in receiving assistance, that assistance consists of \$100 for a period which may last up to 45 days. \$100 in this county will buy you about 2 days or 3 days of food and shelter and that's it for a family of three or four.

As a result, many of the homeless families in this county don't even apply for AFDC. For that reason and also because they are afraid of losing their children. It is a very ugly scenario and is repeated daily in this county.

A homeless family applies for assistance. The social worker decides the children are in danger because they are living in a car. The police are called. The children are taken and placed in a place called McLaren Hall, which is a kind of warehouse for the children that we run in the county. And then at some point, the children are taken away and put in a foster home. Then a kind of tragedy begins. The parents are no longer eligible for AFDC because they don't have any dependent children because the police have removed them. So, they receive nothing, the children are permanently placed in some sort of a foster care situation. The family is destroyed.<sup>32</sup>

<sup>29</sup> Emergency Assistance: Number of Cases, Fiscal Year 1985, Office of Family Assistance, Social Security Administration, February 13, 1986.

<sup>30</sup> *Ibid.*

<sup>31</sup> Hearing, testimony of Jo Anne B. Ross, p. 33.

<sup>32</sup> Hearings before a subcommittee of the Committee on Government Operations, House of Representatives, "The Federal Response to the Homeless Crisis," October 3, November 20, and December 18, 1984, testimony of Gary Blasi, p. 1116

Other States participating in EA are also not able to provide shelter to all homeless families, despite Federal requirements that all destitute families receive shelter. According to the National Coalition for the Homeless, Delaware turns away 50 percent of the families who seek shelter, the State of Washington only provides shelter to one in 10 homeless families, and in Chicago, 65 percent of homeless people turned away from shelter are families.<sup>33</sup>

In States with a greater commitment to providing emergency aid to homeless families, the shelter provided to parents and children is often unsafe and inhumane. For example, a major participant in EA is the State of New York. The State received more than \$21.7 million in its Federal share of EA funding during fiscal year 1985, more than one-fourth of the total \$81.4 million spent nationwide.<sup>34</sup> But because of an inflexibility in the EA law, which does not allow Federal funds to be used for the construction, purchase, rental, or rehabilitation of new emergency shelter, the funds must be spent on existing shelter. The existing shelter in New York City mainly consists of congregate, barrack-style shelters and SRO welfare hotels, both of which are totally inadequate to meet the needs of the 15,000 family members, including 10,000 children, currently in need of emergency shelter.<sup>35</sup>

Many of the shelters and hotels are located in dangerous neighborhoods, and are breeding grounds for criminal activities such as prostitution and illegal drug dealing. The Legal Aid Society of New York conducted tests, and found that homeless families in one shelter had been exposed to lead and asbestos contamination.<sup>36</sup> At another hotel, city officials found nearly 1,000 violations of health, building and housing codes.<sup>37</sup> On March 7, 1986, a hotel for the homeless was cited by the City Health Department for numerous violations of city health laws after an outbreak of gastrointestinal illnesses among children residing there.<sup>38</sup>

In 1984, the Citizens Committee for Children of New York, a respected children's rights organization, conducted an inspection of New York shelters and hotels for homeless families. They found that 70 percent of the families living in the emergency facilities had no cooking facilities, one-third did not have beds and related sleeping needs, and more than half were not provided cribs for infants. Rooms with broken windows and peeling lead paint were being assigned to families in the hotels, and hotels which house drug dealers and prostitutes are used as emergency shelter for families.<sup>39</sup>

In New York's Nassau County, the situation is not much better. A 1984 investigation by the County's District Attorney's Office found "serious deficiencies in the quality of shelter that is provided

<sup>33</sup> Hearing, testimony of Maria Foscarinis, p. 60.

<sup>34</sup> Emergency Assistance, Aid to Families with Dependent Children, Fiscal Year 1985. State 41 Data. Social Security Administration, January 8, 1986.

<sup>35</sup> Figures provided by New York City Department of Human Resources.

<sup>36</sup> "Lead Hazards are Cited in Shelter for Homeless," New York Times, March 11, 1986.

<sup>37</sup> "Nearly 1,000 Violations Cited at a Hotel for the Homeless," New York Times, November 5, 1985.

<sup>38</sup> Hearing, testimony of the Honorable Ted Weiss, p. 48.

<sup>39</sup> "7,900 Homeless Children: The Crisis Continues." Citizens Committee for Children of New York, Inc., October 1984.

those seeking emergency housing." <sup>40</sup> The investigation found that homeless families who the County had believed were sheltered at one facility were actually residing at a boarding home in another location. Both buildings were owned by the same absentee landlord. The building where the homeless families lived was:

A rat and roach infested building, with broken and boarded up windows and walls, with grossly insufficient and broken plumbing, backed up sewage and other severe structural defects. The rear basement door has been torn off, and the house is open to weather and other intrusions. Large and dangerous debris and abandoned automobile wrecks were scattered around the yard. In this house, fourteen separate people were required to live in four bedrooms, with as many as four persons to a small room. One man was placed in the attic. <sup>41</sup>

At another county shelter for homeless families, boarders:

Complained of daily violence and narcotics dealing on the premises.

Broken walls and holes exist throughout the house, many of which were stuffed with rags to prevent free access by the rats which infest the building. <sup>42</sup>

The District's Attorney's report summed up a condition that could, based on the subcommittee's investigation, apply to other locations across the country which receive EA funds:

Serious questions are raised concerning both the Department of Social Services subsidy of grossly inadequate and illegal housing and its failure to provide any apparatus to assist local authorities to insure health and safety codes are met.

Clearly, the various levels of government are working in conflict. Public monies should not be spent to subvert public statutes. While the Nassau County Department of Social Services is under immense pressure, both legal (from Federal and State judges and officials), as well as personal (from daily crises of the Department of Social Services clients themselves), to use any available shelter for Department of Social Services clients, bureaucratic responses, however seemingly practical, are no substitute for fulfillment of the law. <sup>43</sup>

The web of inter-related Federal, State and local emergency assistance available to homeless families has caught destitute families seeking relief in a trap that only leads downward to a break-up of the family structure. As Sandra Brawders, the executive director of a family shelter in Washington, D.C., told the subcommittee:

We are currently standing by and watching the complete disintegration of the only unit of support that poor

<sup>40</sup> "District Attorney's Report Concerning Nassau County Department of Social Services Emergency Housing Placement," May 10, 1984, p. 3

<sup>41</sup> *Ibid.*, p. 5

<sup>42</sup> *Ibid.*, p. 7

<sup>43</sup> *Ibid.*, pp. 11-12

Americans have, and that is the family. We have created solutions that take children away from their mothers because it's easier. We have created more shelters for single adult males and females rather than for families because it is easier. And we have expected mothers to support a child with an extra \$51 a month in a public assistance check, and yet will give a foster parent six times that amount per month to take care of the same child, or \$60 per day for an infant placed in a [foster care] facility . . . because it's easier.

Homeless mothers are not a large voting bloc, and neither are their children, yet, and the cumulative effect of not solving these enormous injustices will result in a clear view of family for only the rich. The poor do not have to be with us always, and if the poor are predominantly women and children, which every study is currently telling us, we are a very sorry nation.<sup>44</sup>

Studies indicate that a majority of homeless families are victims of societal failures. Many homeless families are headed by single female parents, who themselves were abused as children, and abused again by the fathers of their children. It was not government assistance programs that caused their homelessness. But it seems that government programs will often perpetuate their state of homelessness or poverty. Two witnesses at the subcommittee's hearing are tragic examples of this. One, Sally Lovett, a single parent and a resident at the House of Ruth shelter for homeless women in Washington, D.C., was placed in juvenile homes at the age of 15 because her parents abused and neglected her. After leaving the juvenile homes, she had a relationship with a man who fathered her child. The man is now in prison. With a young child to raise, no employment skills, and no family support network, Sally became homeless.<sup>45</sup>

She receives public assistance checks, but they will not cover rent and food for her and her child. She is unable to obtain free day care because her child suffers from seizures, and day care centers will not take responsibility for watching the child if and when Sally can obtain employment. She has been cut off public assistance twice for failure to file monthly reports, and at the time of the subcommittee's hearing, had been living at the shelter for nine months. ". . . ever since the age of 15, I've been down this road of bad," she testified. "Nothing has turned up good."<sup>46</sup> She said the local Department of Human Services is "not doing too much for me. They might be trying, but it's not helping. I think what they need, what needs to be done is that they need to provide more funding for people, for families, for mothers with dependent children so they could get back up on their feet."<sup>47</sup>

Seleda Joyce Mumphrey was a student at Georgetown University when she became pregnant. ". . . I thought that by May 1988, I would be graduating," she testified, "but when I went home for

<sup>44</sup> Hearing, testimony of Sandra Brawders, executive director, House of Ruth Shelter, p. 66

<sup>45</sup> *Ibid.*, testimony of Sally Lovett, p. 68.

<sup>46</sup> *Ibid.*

<sup>47</sup> *Ibid.*

Christmas and I told my mother that I was pregnant, she did what people did back in the forties. She just said: Get out. By that time, I was like 5 months pregnant . . ." With nowhere to turn, she went to a homeless shelter. She needed immediate public assistance, but could not obtain it because of delays in the application process. She entered a work training program, but was rejected because she was pregnant. She tried to have her child put in a public nursery so she could work during the day, but was told the nursery only accepted the children of mentally ill women. She applied for day care for her child, but was informed public day care centers only accepted children over the age of two.<sup>48</sup>

Despite their terrible situations, Sally and Seleda are more fortunate than many other homeless mothers. They at least have a place to live. In Washington, D.C., where Sally and Seleda live, the House of Ruth is the only 24-hour shelter for homeless women with children. The shelter has a waiting list of 39 pregnant women who are homeless. These women have shelters to sleep in, but must walk the streets by day, and are not getting proper nutrition or medical care in a city that has the highest infant mortality rate in the country.<sup>49</sup>

## 2. HHS HAS FAILED TO FOLLOW ITS REGULATIONS ON MONITORING, REVIEWING AND AUDITING THE EA PROGRAM

The increase in the number of homeless families has created a boom industry for shelter operators in New York City. Slumlords who own welfare hotels where the City places homeless families take in as much as \$3,000 a month to house a single family in a squalid room.<sup>50</sup> Meanwhile the City's public assistance guidelines allow a family of three \$247 a month for rental housing.<sup>51</sup>

In Washington, D.C., the local government pays similar amounts to lodge homeless families at the Pitts Hotel, the Capitol's rundown welfare hotel for the homeless. In Washington, homeless families are allowed \$257 a month in public assistance.<sup>52</sup>

Under EA, the Federal Government pays half of the costs of the exorbitant and dangerous welfare hotels for homeless families, and also subsidizes the paltry public assistance allotments. The inequities and waste of Federal funds are condoned by HHS, which allows State governments a totally free hand in administering the EA Program, despite Federal regulations which require HHS to monitor, review and audit State administration of EA to ensure the program is managed effectively and in accordance with Federal law.

Title 45 CFR § 201.10(a) states:

In order to provide a basis for determining that State agencies are adhering to Federal requirements and to the substantive legal and administrative provisions of their approved plans, the Service [HHS] conducts a review of State and local public assistance administration. This review in-

<sup>48</sup> Ibid.

<sup>49</sup> Ibid., testimony of Sandra Brawders, p. 70.

<sup>50</sup> Ibid., testimony of Maria Foscarinis, p. 61.

<sup>51</sup> Information supplied to the subcommittee by the National Coalition for the Homeless.

<sup>52</sup> Hearing, testimony of Sandra Brawders, p. 70.

cludes analysis of procedures and policies of State and local agencies and examination of case records of individual recipients.

Despite this requirement, the subcommittee investigation found that HHS has never objected to the types of Federally-funded shelter in which State agencies and local governments have housed homeless families.

Title 45 CFR 201.12(a) states:

Annually, or at such frequencies as are considered necessary and appropriate, the operations of the State agency are audited by representatives of the Audit Agency of the Department [HHS]. Such audits are made to determine whether the State agency is being operated in a manner that:

- (1) Encourages prudent use of program funds, and
- (2) Provides a reasonable degree of assurance that funds are being properly expended, and for the purposes for which appropriated and provided for under the related Act and State plan, including State laws and regulations.

The regulations clearly call for audits, yet when the subcommittee requested copies of all audits performed of the EA Program for the period January 1, 1981, to January 1, 1986, it was informed by HHS that "No financial audits have been conducted during this time period."<sup>53</sup>

Title 45 CFR 205.40(b) requires that State agencies have a "continuing system of quality control" over their public assistance programs, including EA, and that quality control reviews be submitted to HHS. But, according to the SSA Associate Commissioner for Family Assistance, "There is no quality control requirement for the Emergency Assistance Program."<sup>54</sup> SSA explained that quality control is based on statistical samples, and because EA is small in comparison to other SSA programs, quality assurance would be "a burdensome requirement for a program that small."<sup>55</sup>

The committee finds HHS' failure to adequately monitor the use of EA funds to be a totally unacceptable dereliction of its responsibility to ensure that Federal monies are not only spent properly, but are expended in a manner consistent with the law. The intent of Congress in amending Title I of the Social Security Act was to aid families in need of emergency assistance. Allowing Federal funds to be spent on unsafe shelter at exorbitant costs disregards Congressional intent. The committee believes that HHS must guarantee that every State participating in EA provide emergency services to all homeless families eligible for such aid, but that assistance must be safe and humane. HHS has failed to meet the requirements of the law.

<sup>53</sup> Ibid., testimony of the Honorable Ted Weiss, p. 36.

<sup>54</sup> Ibid., testimony of Jo Anne B. Roes, p. 41.

<sup>55</sup> Ibid.

9. THE SHELTER SYSTEM FOR HOMELESS FAMILIES CURRENTLY FUNDED BY EA IS DESTRUCTIVE TO FAMILIES, HARMFUL TO CHILDREN AND MAY BE PERPETUATING LONG-TERM HOMELESSNESS AMONG FAMILIES

The tragic irony of EA is that, despite its good intent, it may be funding programs that contribute to and perpetuate family homelessness. This finding is supported by the subcommittee's investigation and the first in-depth study ever conducted of homeless families by researchers at Harvard Medical School.

The Harvard study found that social inequities, family crises and the inadequacies of the welfare and shelter systems have apparently foreordained homelessness for families. The case of Linda, the head of a homeless family and a subject of the study, is typical of the cases examined by the Harvard researchers. According to Dr. Bassuk:

Linda was born in Tennessee. Her mother, a chronic alcoholic with manic-depressive illness, worked intermittently as a maid. As a result, Linda was cared for by an elderly woman who frequently left her alone. At age 4, her mother reclaimed her and moved the entire family to Boston. Linda remembers her mother calling her names, beating her with sticks, and locking her in the closet. Unable to tolerate the continuous abuse, she became a runaway at age 8. During the next 3 years, she wandered the streets and was temporarily placed in department of youth services facilities, but always returned to mother who severely beat her.

Since that time, she has never lived anywhere for longer than 2 years. At the age of 11, she was sent to the New England Home for Little Wanderers for 2 years. By then she no longer cared about anything and felt nothing. At age 13, she was placed with a foster family where the father sexually abused her.

Feeling helpless and hopeless, she made a serious suicide attempt at age 15. An older sister took her in, but when she became pregnant and refused to have an abortion, her sister threw her out. Desperate and frightened and with no place to go, she lived on the streets and in abandoned, rat-infested buildings.

She gave birth to Tommy 3 years ago. Since that time, they have lived in 12 different places—in the apartments of several sisters, her mother, friends, and a boyfriend in Florida, in abandoned buildings and in three family shelters. Until recently, Linda disciplined her son by beating him, but stopped when he seemed frightened most of the time. On evaluation, Tommy manifested major problems in every area of development, including language, fine and gross motor skills, and social relationships. He has a developmental age of approximately 2 years and is already a full year behind.

Without work skills or a high school education, Linda's future is bleak. She currently receives \$328 per month from AFDC, has Medicaid, food stamps, and [a] 707 certificate.

Despite her son's urgent needs and the intensive help she has received from the shelter staff, she has not found stable housing or a day care program for him. With the exception of the department of public welfare, who gives her a check, she has no contact with any social service agency.<sup>56</sup>

Most of the homeless families included in the Harvard study came from backgrounds similar to Linda's. Eighty-five percent of the families studied were headed by women on AFDC. The majority of the women lived in unstable situations prior to coming to the shelters. Approximately 33 percent of the families had lived in other emergency shelters, 50 percent having lived in hotels, and 85 percent had been doubled up with relatives or friends in overcrowded apartments.<sup>57</sup>

Nearly 60 percent of the families became homeless because of eviction, nonpayment of rent, condominium conversions and overcrowding. Almost one-third also described a personal crisis as precipitating homelessness, such as dissolution of a relationship with an alcoholic, battering and death or illness within the nuclear family.<sup>58</sup>

Although economic factors appeared to be the central cause of family homelessness, two-thirds of the families interviewed were headed by individuals who had grown up in broken homes. Many of these individuals exhibit an inability to function as adults. Most had sporadic or nonexistent work histories, and no stable, reliable relationships or supports.<sup>59</sup>

In commenting on the study, Dr. Bassuk noted:

Poverty itself erodes a person's self-esteem and confidence and creates feelings of despair and alienation. When poverty is coupled with the breakdown of family structure and values, its effects are more pernicious. Those who lack the early nurturance of a mothering figure, have been abused, have lived in chaos during their formative years, or who lack positive role models, often manifest this profound deprivation by developing behavioral disorders later on in life.<sup>60</sup>

The prevailing evidence of this study and other case studies examined by the subcommittee indicates that emergency shelters funded by the Federal Government often are not the paths to better lives, but traps from which homeless families cannot escape. The children raised in these shelters and welfare hotels may be the next generation of the homeless. When asked about the adequacy of the shelters, Dr. Bassuk testified that the shelters "need far more services. The needs of the children are not attended to, except in certain unique situations. Many of these children are not in school. The stresses of shelter life are intense. The children mirror the inadequacies of the shelter in their discussions of suicide, their

<sup>56</sup> *Ibid.*, p. 74.

<sup>57</sup> *Ibid.*, p. 75.

<sup>58</sup> *Ibid.*

<sup>59</sup> *Ibid.*

<sup>60</sup> *Ibid.*, p. 76.

high levels of anxiety, and their impairment in developmental milestones. Many of the children we saw also had sleeping and eating disorders."<sup>61</sup>

The effect of shelters on children is the most alarming finding of the Harva 'd study. Dr. Lenore Rubin of Harvard Medical School testified:

Given a mother's pervasive and chronic emotional disabilities, it is not surprising that the children manifest a wide range of emotional, social, and cognitive difficulties, as well as lags in developmental milestones. The children's problems are heightened by the stress of repeated disruptions, most currently, living in a shelter where there is little privacy and overcrowding. A mother's distress about her homelessness is naturally communicated to her children. Because of the absence of a second parent, and the lack of child care in the majority of shelters, mothers often spend 24 hours a day with their small children. School provides some relief for the older children. Generally, the shelter atmosphere is tense and sometimes explodes into episodes of abuse.<sup>62</sup>

The Harvard study found that 47 percent of the preschoolers in shelters had severe developmental impairments. The children had difficulty with language, motor, social and personal development skills.<sup>63</sup>

Fifty-four percent of school-age children studied were clinically depressed. Most of them had suicidal thoughts, and suffered from severe anxiety.<sup>64</sup>

All available evidence indicates that the shelters and welfare hotels partially funded by the Federal Government are environments which are doing irreparable harm to the children staying in them. These are not all the homeless children. Because of the scarcity of shelter, many homeless families are turned away from shelter, or do not attempt to find safe havens. The emotional and physical damage done to these children of the streets has not been gauged, but must be intense and horrible.

The committee believes that in the face of the evidence, the Federal Government must at least assume responsibility for the outcomes of the programs it administers, such as EA. HHS must work with State and local governments in providing adequate shelter for the homeless.

<sup>61</sup> Ibid., p. 82.

<sup>62</sup> Ibid., testimony of Lenore Rubin, Ph.D., Harvard Medical School, p. 77.

<sup>63</sup> Ibid.

<sup>64</sup> Ibid., p. 78.

## IV. RECOMMENDATIONS

1. HHS SHOULD FOLLOW ITS REGULATIONS AND AUDIT, REVIEW, AND MONITOR THE EA PROGRAM TO ENSURE THAT EMERGENCY SHELTER FUNDED BY THE FEDERAL GOVERNMENT IS SUFFICIENT TO PROTECT THE HEALTH AND WELL BEING OF MEMBERS OF HOMELESS FAMILIES, AND IS ALSO COST EFFECTIVE

The attitude of HHS officials is that the problem of homeless families and the management of the EA Program are solely within the purview of State and local governments. This attitude has resulted in the inadequate and often inhumane treatment of members of homeless families. State and local governments often do not have the resources to provide even minimal shelter to all homeless families. They also lack the expertise and, in some cases, the commitment, to plan and deliver proper services to homeless families in need of assistance. The Federal Government should take the lead in directing a national relief effort for homeless families, using an already existing program, EA. Until this occurs, the plight of homeless families will worsen, and their numbers will continue to increase. HHS should use its existing regulatory powers to reform emergency aid efforts for homeless families in the U.S.

2. USING EA FUNDS, IN CONJUNCTION WITH STATE AND LOCAL BUDGETS, HHS SHOULD DEVELOP A MODEL SHELTER PROGRAM FOR HOMELESS FAMILIES

The current shelter system for homeless families is not only inadequate, it is detrimental to its residents. Alternative, multi-faceted shelters would not only be of greater benefit to the homeless, they would be less expensive than the exorbitant welfare hotels and congregate shelters currently being used. A model system would begin with sanitary shelter offering a modicum of privacy for families. Such a shelter would serve nutritious food, and would also offer day care, employment counseling and medical services. Because of the generally dysfunctional state of most homeless families, a model shelter should offer multi-disciplinary case management that would evaluate each family according to its emotional, physical and personal problems, and recommend a therapeutic plan of assistance that will eventually lift families from their long-term state of homelessness. HHS has the resources to establish such a shelter, which could then be a model for all State and local governments attempting to combat the homeless crisis. It should use them.

3. HHS SHOULD CONDUCT AN OUTREACH AND EDUCATION PROGRAM TO INFORM THOSE STATES NOT PARTICIPATING IN EA, BUT WHICH HAVE HOMELESS PROBLEMS, ABOUT THE BENEFITS AND USES OF THE EA PROGRAM TO ENCOURAGE STATES TO USE THE FEDERAL EMERGENCY FUNDING

Only half the States and territories eligible for EA participate in the program. Although many of these jurisdictions do not have substantial numbers of homeless families, several of them have large

homeless family populations, and lack resources to adequately provide assistance, HHS should conduct an outreach effort to ensure that all States not participating in the EA Program are aware of its benefits in order to make the most informed decision possible about opting for EA assistance.

**4. HHS SHOULD USE EA PROGRAM STATISTICS AS A PARTIAL BASIS FOR COUNTING THE NUMBERS OF HOMELESS FAMILIES**

There is a great controversy concerning the actual numbers of homeless people in the U.S. No studies have accurately assessed the problem and, indeed, because of the transient nature of the homeless and their reluctance to talk to census takers, it may be impossible to make a precise count of the population. HHS figures show that 33,000 homeless families a month are receiving EA. However, HHS does not know how many individuals this figure represents, and how many of the 33,000 are carried from month to month. The EA Program represents an excellent opportunity for the Federal Government to conduct an accurate census at least of the homeless families participating in EA. They do not represent all homeless people, or even all homeless families. Only half the States and territories use EA. But a survey of EA recipients will at least be a starting point.

**5. THE PRESIDENT SHOULD ISSUE AN EXECUTIVE ORDER DECLARING HOMELESSNESS A NATIONAL EMERGENCY AND REQUIRE THE FEDERAL GOVERNMENT TO COORDINATE ALL EXISTING RESOURCES TO PROVIDE IMMEDIATE EMERGENCY ASSISTANCE AND LONG-TERM SOLUTIONS TO THE CRISIS OF THE HOMELESS**

This is the second report issued during the 99th Congress by the committee on homelessness. Since the committee's first report in April 1985, homelessness has increased, particularly among families. The first report recommended that the President issue an executive order to coordinate Federal assistance efforts. This recommendation calls for no new programs, although they are needed, but simply asks the President to seek coordination of existing programs, such as EA, that can be used to alleviate the plight of the homeless. The President ignored the committee's first recommendation. An HHS task force on the homeless, created to coordinate Federal relief efforts, has slowed to a virtual halt. The administration continues to ignore the problem of the homeless at the same time the problem worsens. Again, we ask the President to recognize the crisis, and work with the Congress in providing help in areas where local resources are insufficient.

**6. CONGRESS SHOULD AMEND TITLE I OF THE SOCIAL SECURITY ACT TO ALLOW EA TO BE USED FOR THE CONSTRUCTION, PURCHASE, RENTAL, AND REHABILITATION OF EMERGENCY SHELTERS FOR HOMELESS FAMILIES**

HHS is funding dangerous and exorbitant shelters primarily because adequate alternatives do not exist in most U.S. cities. Expensive, inadequate shelter wastes Federal dollars and perpetuates the condition of homelessness. Congress should recognize this problem

by amending Title I to allow EA to be used for the creation of new shelters. In the long run, this section would save Federal and local funds, and encourage more States to participate in EA.

DISSENTING VIEWS OF HON. ROBERT S. WALKER, HON. FRANK HORTON, HON. ALFRED (AL) McCANDLESS, HON. LARRY E. CRAIG, HON. HOWARD C. NIELSON, HON. JIM SAXTON, HON. PATRICK L. SWINDALL, HON. THOMAS D. (TOM) DELAY, HON. RICHARD K. ARMEY, HON. JIM LIGHT-FOOT, AND HON. BEAU BOULTER

In response to a Committee Report issued in April 1985, entitled "The Federal Response to the Homeless Crisis," we wrote, "There can be no doubt that homelessness is a tragic situation." We have not changed our feeling, which certainly applies to the tragedy of family homelessness. The image of a child roaming the streets or huddled in an alley due to lack of housing is heart-rendering. The problem of homelessness with all of its complexities must be addressed by all levels of government and by private organizations.

Inasmuch as this report is another effort aimed at eliciting sympathies as the cold winter months approach, it is well-timed and, at first glance, may be considered effective. However, there are several major flaws in the report that compel us to oppose it.

First of all, in its discussion of the causes of family homelessness, there is no mention whatsoever of mental illness or alcohol and drug dependency. According to the 1985 Committee report, the National Institute of Mental Health "estimates that 50 percent of the homeless may have severe mental disorders. The Subcommittee's investigation also indicated that large numbers of homeless are chronically mentally ill." The 1985 report goes on to say that "because the very state of homelessness can cause varying degrees of mental illness in relatively short periods, there may be even larger percentages of the homeless who are mentally ill than NIMH estimated." Likewise, the 1985 report states that "A high percentage of the homeless . . . suffer from alcohol or drug dependency."

We agree that homelessness is a complex phenomenon resulting from a variety of causes. However, the omission of mental illness and alcohol and drug dependency from a discussion of the causes is significant since it leads the authors of the report to conclusions which do not relate to a principal problem of the homeless. Deinstitutionalization of mentally ill persons is coming under increasing question. Whether the appropriate response to it is massive federal assistance for the deinstitutionalized is an issue of great importance. That subject should be the focus of comprehensive study. Addressing it piecemeal, by focusing on one specific need of a portion of the mentally ill population, is not likely to lead to an overall solution.

Second, the Emergency Assistance (EA) Program, while accurately described as a means of responding expeditiously to the immediate and emergency needs of destitute families, is held out as a means of meeting ongoing maintenance needs of those without shelter. That was never the intent of the program. To the contrary,

(21)

EA was created to respond quickly to a family's emergency needs by providing temporary assistance. EA was not designed to address many of the causes of homelessness, such as shortages of low-cost housing, problems related to chronic alcoholism or mental illness, or unemployment. Consequently, to come to a conclusion that emergency assistance programs are unable to adequately address the problem of homeless families is extraordinarily misleading. Of course these programs cannot be considered adequate to meet the needs of homeless families—they were never intended to do so.

Third, the EA program is not mandatory. It is an optional program, and States that are not participating have opted not to do so. Moreover, States that do opt to participate are given a great deal of flexibility to determine the types of emergencies they will cover as well as the types of assistance they will provide. Such an approach is sensible and responsible in view of the different needs that arise in different parts of the country. While the report acknowledges these facts, it also contains implied criticism of both States that have opted not to participate, indicating that they are not responsive to their residents' needs, and some States that do participate, indicating that they severely restrict the use of EA funds. Such criticism fails to recognize that many States may have in place other programs that allow them to respond to emergency situations. In addition, the criticism also ignores the fact that the flexibility given to the States in determining the emergency situations they will cover and the services and assistance they will provide allows those States to tailor their programs to their own residents' needs.

We continue to believe that imaginative solutions to the complex problem of homelessness must be sought from all available public and private sources. The Emergency Assistance Program, by permitting States to participate at their option and to a large extent to shape their own programs, is much more likely than a federally mandated program to lead to the evolution of imaginative solutions. The most meaningful, long-term response to the tragedy of homelessness can and should be provided at the State and local levels—by State and local governments and private organizations.

ROBERT S. WALKER.  
FRANK HORTON.  
ALFRED A. (AL) MCCANDLESS.  
LARRY E. CRAIG.  
HOWARD C. NIELSON.  
JIM SAXTON.  
PATRICE L. SWINDALL.  
THOMAS D. (TOM) DELAY.  
RICHARD K. ARMEY.  
JIM LIGHTFOOT.  
BEAU BOULTER.

## ADDITIONAL VIEWS OF HON. TED WEISS

The minority's dissenting views state that deinstitutionalization of the mentally ill is a cause of family homelessness. This is incorrect and misleading. The report omits deinstitutionalization because it is not a cause of homelessness among families. Although deinstitutionalization resulting from mental health program reforms is a major cause of *individual* homelessness, it is not a factor leading to family homelessness. The factors causing family homelessness noted in the report, such as the scarcity of low-income housing, inadequate income or public assistance benefits, increases in personal crises and cuts in Federal assistance programs, are factors identified in major studies of homeless families. No studies have found deinstitutionalization of the mentally ill to be a cause of family homelessness.

The reasons deinstitutionalization is not a cause of family homelessness are obvious. The family of a household head who is institutionalized will have disbanded or been provided other support long before the person is released from an institution. Indeed, institutionalization, rather than deinstitutionalization, would be a cause of family homelessness.

I caution readers of the minority's dissenting views not to include deinstitutionalization as a cause of family homelessness when considering solutions to the problem in their localities. To examine deinstitutionalization as a factor would be an unfortunate diversion of resources.

In addition, I must question the dissenting views contention that the report calls for the EA Program to be used as a permanent housing program. This is not the case. Nowhere in the report is EA characterized as anything other than a program to meet the emergency needs of destitute families with children. The committee does not believe EA is able to address the causes of homelessness. Solutions must be found elsewhere. The committee believes, however, that EA has been deficient even as an emergency, temporary program, and that weaknesses in the program must be addressed and corrected.

TED WEISS.

**ADDITIONAL VIEWS OF HON. ROBERT S. WALKER**

The Subcommittee Chairman does the Minority Members and any readers of this document a great disservice in his Additional Views. Rather than acknowledging the problems we have identified, he has badly mischaracterized our views.

**ROBERT S. WALKER.**

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