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ABSTRACT

This report focuses on options for rehousing the individuals and families who are currently homeless in America, and on strategies for preventing homelessness of additional people. As many as 736,000 persons are estimated to be homeless on any given night, and between 1.3 million and 2 million different individuals may experience homelessness at some point during the year. The following characteristics of the homeless are outlined: (1) families comprise about 25 to 33 percent of the homeless population, the majority of which are female-headed; (2) mentally-ill individuals and alcohol or substance abusers comprise 50 percent of the homeless; and (3) the remaining 25 percent of the homeless population includes employable individuals, those for whom some form of training is required before employment, and small segments comprised of the elderly, the physically disabled, and veterans. The following strategies are suggested: (1) expand the supply of low-income housing; (2) preserve the existing subsidized housing stock; (3) reassess welfare allotments; (4) improve single-room occupancy (SRO) housing; (5) reduce housing costs through innovative design and regulation; (6) create alliances among public, private, and nonprofit housing providers; and (7) develop counseling and assistance programs for those at risk of homelessness. Statistical data are included on four tables. Estimates of the homeless population by city, the results of local studies of the characteristics of the homeless, and a list of 38 references are appended. (FMW)

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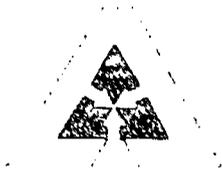
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HOUSING AND HOMELESSNESS

A Report of

The National Alliance to End Homelessness



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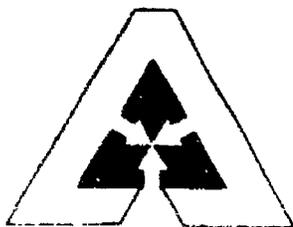
JUNE, 1988

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EXECUTIVE SUMMARY

Homelessness in America is a severe, persistent, and growing problem. While the size of the homeless population is difficult to estimate, as many as 736,000 persons could be homeless on a given night in 1988, and considerably more could experience homelessness over the course of the year. The roots of homelessness are complex and only partially understood. However, they appear to reflect the confluence of a number of different forces: the deinstitutionalization (and noninstitutionalization) of the chronically mentally ill; continued high unemployment in some parts of the country and in certain industries; the rise in the number of poor, female-headed households; cutbacks in public assistance benefits; and declines in the supply of affordable housing, as well as federal funding for the creation of such housing. While the high cost of housing is only one of the factors behind the phenomenon of homelessness, it has produced a situation in which those with the least ability to compete are allowed to drop out of the housing market entirely.

This report focuses on the housing needs of the homeless, specifically options for rehousing those individuals and families who are currently homeless and strategies for preventing additional homelessness. As background to this discussion, the National Alliance to End Homelessness explores two of the major questions that must be answered before effective planning can begin, namely: How many homeless are there? What are their characteristics and needs?

The limitations of such an effort must be emphasized from the start. Given the available data, definitive answers simply do not exist. Current studies can be criticized on a number of methodological grounds, and the majority are local, not national, in scope. Particularly where numbers are concerned, definitional problems arise. For example, most estimates focus on those who sleep in shelters, in places such as park, or abandoned buildings, or in rented hotel and motel rooms paid for by public or private agencies. However, other groups might also be considered homeless: those who are doubled-up with friends or relatives, those who are living in short-term rentals, or those who are in institutional care and have no address. In addition, one might identify a large number of persons who

are "at risk" of homelessness, including those who suffer from the types of chronic problems observed among the current homeless, as well as those who are living in housing units that are so costly (relative to their incomes) that the situation must be described as tenuous at best.

Assessing the characteristics of the homeless is no easier than pinpointing their numbers. Although many local studies provide extensive data on homeless persons, the different populations they cover (for example, street vs. shelter) and the varying definitions used make patterns difficult to ascertain. Furthermore, local studies show tremendous variation by city. This is not surprising since a host of local factors could affect the size and composition of the population, including the availability and quality of mental health care or the nature of the housing market itself. This variability does, however, argue for caution in attempting to arrive at a "national portrait" of the homeless; it also argues for permitting maximum local flexibility in developing programs designed to meet the needs of this diverse population.

Despite these problems, Housing and Homelessness attempts to cull insights from the existing literature in order to present a snapshot of the homeless that can be used to help guide planning activities. Section I begins with a discussion of the size of the population, followed by an identification of major subgroups among the homeless. Section II then turns to a set of housing strategies that can be used to provide housing for those currently homeless and to reduce the flow of new households into the homeless population.

COUNTING THE HOMELESS

No one really knows how many people are homeless today. Estimates differ widely at both the local and national level, and no single set of estimates is clearly superior to the rest. After reviewing the existing evidence, the Alliance estimates that as many as 736,000 persons may be homeless on a given night, and that between 1.3 million and 2 million different individuals may experience homelessness at some point during the year.

This estimate of the number of homeless on a given night is based on data originally assembled by the U.S. Department of Housing and Urban Development (HUD), but interpreted in a different light. While the HUD study attempted to collect data for metropolitan areas--including central cities and their surrounding suburbs--most cities have charged that the HUD figures represent city, not metropolitan estimates. The Alliance has accepted this criticism and has adjusted the data accordingly.

However, unlike other studies, the Alliance does not assume that the rate of homelessness in the cities is equal to that in the suburbs. Instead, data is used from the Washington, D.C. area (the only data available) to estimate a city-suburban rate differential, which is applied to a national total. The Alliance estimates that the rate of homelessness in the suburbs (9/10,000) is one-third of the city rate (28/10,000). This approach produces a total of 355,000 homeless individuals as of 1984.

Over the intervening four years, homelessness has certainly increased. However, no reliable data exist on the actual rate of growth. For example, if the homeless population has been growing at a rate close to that of the overall population (that is about 1 percent per year) this would yield a 1988 population of under 400,000 persons. On the other hand, local officials have estimated that the demand for shelter has been increasing at a rate of roughly 20 percent per year. Applying this growth rate to the 1984 estimate would yield a current population of 736,000. While the truth is probably somewhere in-between, the 736,000 figure is a reasonable upperbound estimate of the number of homeless on a given night as of the present time.

Nightly counts are appropriate for planning shelter beds. However, in planning permanent solutions, it is more appropriate to consider the number who become homeless at some time during the year. If people are homeless for a relatively short period of time, nightly and annual counts can differ significantly. The Alliance used the relationship between "nightly" and "annual" counts that was derived in a study of Chicago's homeless to arrive at a national estimate of the number of individuals likely to be homeless at some time during the year. Using a 1988 base of 736,000, this procedure produces an upperbound estimate of between 1.3 million and 2 million persons who could be homeless at some time during the year.

CHARACTERISTICS OF THE HOMELESS

From the broadest perspective, the homeless population can be divided into two groups: those who are members of families, and those who are homeless alone (individuals). The problem of family homelessness has received a great deal of attention in recent years, and families are the fastest growing segment of the homeless population. A review of existing studies suggests that about 25 to 33 percent of the homeless population is made up of persons in families.

Family homelessness includes both intact families and female-headed households; however, the latter group predominates. Some of these families have experienced

homelessness as a result of a particular crisis (fire, eviction, divorce, domestic violence), suggesting that their homeless condition may be of relatively short duration. However, there is also evidence of families who are "multi-problemmed" and for whom homelessness is a relatively chronic condition. There is also strong evidence that one of the contributing factors to increased family homelessness is the size of the housing allotments provided to recipients of Aid to Families with Dependent Children (AFDC). Nationally, these allotments average only 49 percent of the cost of a modest unit, and in some parts of the country, they are as low as 29 percent.

Among homeless individuals--who make up the majority (67 to 75 percent) of the population--several major subgroups can be identified. These include the mentally ill and alcohol or substance abusers. The Alliance estimates that each of these two subgroups accounts for roughly one-third of the single homeless population, or 25 percent of the homeless population as a whole. Although some family members also fall into these groups, their proportions are relatively low.

The mentally ill are a diverse group, but generally exhibit a diminished capacity for self-care, interpersonal relationships, and work or schooling, and typically require long-term mental health care. The large number (25 percent) of mentally ill persons among the homeless population was originally attributed to deinstitutionalization policies of the 1960s, but the age profile of the homeless (median age 35) suggests that noninstitutionalization and inadequate funding for community programs are also at work. Little data link mental health status to length of homelessness, but one might assume that the mentally ill figure prominently among the longer-term homeless.

The second group accounting for substantial numbers (also 25 percent) includes alcoholics and drug abusers. This condition affects men proportionately more than women, and older men show somewhat higher rates than younger men. Substance abuse might be considered a precipitating factor in homelessness for these individuals, and is clearly a condition that must be addressed as part of any rehousing strategy. Substantial overlap is also likely between substance abuse and other barriers to employment (age, education, work experience, criminal convictions) that will have to be considered as well.

Finally, one must address the remaining one-fourth of the population for whom no single classification applies. Presumably this includes both employable individuals (the "economic" homeless) with established work histories, and those for whom some form of training, education, or other service program is a prerequisite to employment and self-

sufficiency. A variety of other subgroups are among the homeless who overlap with those described above. These include the elderly (a relatively small segment), the physically disabled (also small), and veterans. The latter group may account for as much as one-half of the single male population.

HOUSING STRATEGIES FOR THE HOMELESS

Housing strategies for the homeless include programs or policies to prevent new homelessness and efforts to rehouse those who are currently homeless. The former are appropriate elements of an overall national housing policy and focus on strategies to reactivate the role of the federal government, to expand the supply of available low-income units, and to intervene in situations of imminent homelessness. The recommendations for housing the homeless formulated by the National Alliance to End Homelessness are presented in Section II. The following is a brief overview.

- Expanding the Supply of Low-Income Housing. The current supply of low-income housing falls short of demand. The Alliance estimates that about 5.5 million units would be required to meet this gap. However, HUD housing programs currently focus on the provision of tenant-based subsidies that enhance a family's purchasing power, but do little to increase the supply of new units. Since supply problems may be localized in nature, it is appropriate that state and city governments are becoming more important actors in the construction and rehabilitation of lower-income housing. Nevertheless, supply issues need to be addressed at the national level, both through the provision of funding and through public and private efforts to better meet this need.

- Preserving the Existing Subsidized Stock. Currently, about 4 million households live in units subsidized by HUD, about one-half of these (2 million) in privately owned units developed under a variety of new construction and rehabilitation programs. It has been estimated that as many as 1.4 million of these units may be removed from the stock over the next 20 years, due to prepayment provisions in older Federal Home Administration (FHA) mortgages, opt-out provisions in early Section 8 contracts, normal subsidy expirations, and losses due to physical or financial collapse. Both public and private groups are working to develop programs to preserve this valuable stock and prevent the high levels of displacement that would result from its loss.

- Reassessing Welfare Allotments. The large and increasing number of homeless families who are current AFDC recipients is, in part, due to the fact that the housing

allotments provided under this and other income maintenance programs fall far short of the amounts actually needed to purchase housing. Just under one-half of all publicly assisted families and individuals (AFDC, Supplemental Security Income, and General Assistance) currently pay more than 50 percent of their incomes for housing. While the relationship between welfare allowances and housing subsidies is complex, efforts are needed to rationalize the two approaches to meeting housing costs and to provide sums that better reflect the actual costs of today's housing market.

- Single-Room Occupancy. One component of the stock which merits particular attention is single-room occupancy (SRO) units. Once considered substandard housing, SROs have shown themselves to be an important alternative for individuals with extremely low incomes, and several major cities have undertaken programs to upgrade and preserve the supply of these units. Additional family housing (typically larger units) and residences for the mentally ill are also needed, as demonstrated by the large proportions of the homeless that fall into these two groups.

- Design and Regulatory Issues. Continued efforts need to be directed to reducing housing costs through innovative construction and design and through a reassessment of local policies that may tend to increase housing costs unnecessarily. The latter include local rehabilitation standards and zoning regulations.

- Public, Private, and Nonprofit Providers. To the extent that supply problems are localized, it is appropriate that states and localities initiate action on their own behalf. States and localities have responded by adopting a more aggressive role in the development of supply-oriented programs, including low-income housing funds to finance construction and rehabilitation. Such funding, however, must be augmented by increased federal appropriations for low-income housing.

The primary providers of low-income housing are public housing agencies, nonprofit organizations (including community development corporations), and the private sector. Given existing conditions, including changes in the 1986 Tax Reform Act, it is unlikely that for-profit developers will find the present rate of return on investment sufficient to engage in large-scale activities on behalf of the homeless. At present, nonprofit organizations are the predominant providers of housing to the very low-income homeless population. However, if America is to meet its national housing goals, private sector involvement is required. An effective alliance must be created that includes all housing providers. Such an alliance should result in well-targeted

allocations to the poorest of America's poor, the homeless, on a scale commensurate with their number.

● Counseling and Assistance to Prevent Imminent Homelessness. Finally, programs need to be developed to assist families and individuals on the brink of homelessness. Measured against the costs of homelessness, such interventions might be well worth the expense. They include: mediation of landlord tenant disputes that might otherwise lead to eviction; negotiation and counseling to prevent foreclosure; assistance in finding housing; and short-term financial assistance to households that are in danger of losing their current housing or cannot afford the transaction costs of obtaining new housing.

Taking all factors together, the phenomenon of homelessness argues for a renewed national commitment to the goal of ensuring safe, decent, and affordable housing to all Americans. While the elements of such a policy will be hotly debated, the problem of homelessness will not be resolved without maximum public and private commitment to meeting the nation's housing needs.

INTRODUCTION

Homelessness is a problem of national scope and crisis proportion in the United States. The ranks of the homeless not only include the traditionally recognized urban bag lady and skid row alcoholic, but increasingly reflect all of America's poor. Homeless individuals are young and old, able and disabled, employed and unemployed, mentally ill and healthy. They are individuals, families, veterans, runaway youth, and teenage mothers. They are low-income families displaced by escalating housing costs and countless others who find themselves in need, but without family or community support. They live not only in urban areas, but can be found in newly impoverished rural farming communities and wealthy suburbs.

How many homeless people are there? Estimates of the size of this population vary greatly. The National Alliance to End Homelessness estimates that on any given night in 1988, 736,000 people will be homeless. Over the course of 1988, the Alliance estimates as many as 2 million people will be homeless. The homeless population is increasing at a significant rate per year, with the highest rate of increase being among families. Some groups, including the U.S. Conference of Mayors, estimate that the rate of increase exceeds 20 percent per year.

What has caused this crisis, particularly in a time of national economic prosperity? The causes are many.

- Federal Cutbacks. Since 1980 the budget authority for federal housing programs has been cut by 75 percent, from \$30 billion in fiscal year (FY) 1981 to \$7 billion in FY 1987 (1). In addition, the eligibility and payment standards for Aid to Families with Dependent Children (AFDC), Food Stamps, disability, and other federal support programs have been tightened. Thus, an increasing number of low-income and poor people are forced to compete on the open housing market with reduced disposable incomes. Those who are not successful become homeless.

- Urban Revitalization and Displacement. The inner-city redevelopment of the 1970s and 1980s brought many benefits, but it also left a wake of displaced poor. Up to

1) Barry Zigas, "Homelessness and the Low Income Housing Crisis," National Low Income Housing Coalition, Washington, D.C., 1987, p. 1.

50 percent of the nation's stock of single-room occupancy (SRO) housing was destroyed as a result of this process. Currently, some 2.5 million people are displaced from their homes each year, most entering a spiral of increasing housing costs, overcrowding, and worsening housing conditions (2). Between 1970 and 1980 the number of housing units affordable to very low-income households (those earning \$5,000 per year or less) shrank from 15 million to 3 million, leaving only half as many units as families (3). Today, the shortage of affordable units may be as large as 5.5 million (4).

- Deinstitutionalization. In the 1950s more than 550,000 patients could be found in state mental hospitals in any given year. Today that number totals fewer than 150,000. The community-based mental health system that was planned to support these patients was never fully funded. As a result, thousands of low-income, mentally ill people have found themselves on the streets.

- Destabilization of the Family. The 1980s have seen an expansion in the number of single-parent households, with reduced economic means, seeking increasingly unavailable housing. The tragic fallout from drug and alcohol addiction and the increase in runaway youth have also made their contribution to the ranks of the homeless.

- Economic Changes. From 1960 to 1980 the nation lost 20 percent of its solidly middle-income manufacturing jobs (5). These have been replaced largely by much lower-paying service positions of little security and usually without benefits such as health insurance. The resulting reduction in disposable income has led to the disillusioning phenomenon of employed homeless people.

Together, these and other factors have resulted in a widening gap between the funds people have to pay for housing and the cost of that housing. Based on data from

2) Chester Hartman, "The Housing Part of the Homelessness Problem," in Homelessness: Critical Issues for Policy and Practice, Boston Foundation, 1987.

3) Zigas, op. cit.

4) Sandra Newman and Ann Schnare, Subsidizing Shelter: The Relationship Between Welfare and Housing Assistance, Report No. 1, The Urban Institute Press, Washington, D.C., May 1988.

5) Mark Griuker, "The Causes of Modern Homelessness," Food Monitor Winter:1988.

the 1983 Annual Housing Survey, the median percentage of income spent on rent is 60 percent for renters with income under \$3,000; it is 55 percent for those earning less than \$7,000; and 39 percent for those earning less than \$10,000 (6). In federal housing assistance programs the percentage of income to be spent on rent is targeted at 30 percent. Once a family or individual falls out of the housing market through eviction, disaster, or domestic upheaval, they will have great difficulty in finding affordable replacement housing. If families do find replacement housing, the first and last months' rent, plus the required security and utility deposits, are likely to be greater than the resources they have available. All too often the result is homelessness.

Section I of this report examines the size and characteristics of the homeless population to assess more realistically its housing needs. Section II discusses recommendations on housing the homeless. It begins with strategies to prevent homelessness, then examines the dual issues of housing supply and affordability, and finally looks at a few of the housing and housing-related needs specific to the homeless population.

6) Hartman, op. cit.

I

ESTIMATES OF THE SIZE OF THE
HOMELESS POPULATION

Planning strategies to help the homeless is complicated by a lack of information about the population and the difficulty of sorting out factors thought to cause homelessness. Innumerable commissions and task forces at all levels of government have grappled with essentially the same questions:

- How many homeless people are there?
- Who are they?
- Why are they homeless?
- What needs to be done?

Although no one has arrived at satisfactory answers, each effort has contributed something. This section draws from efforts to construct, as accurately as possible, an assessment of the size of the homeless population.

Limitations on this assessment must be recognized from the start. Given the nature of the available data, definitive answers to the many questions surrounding the homeless issue simply do not exist. The numerous studies completed thus far can be (and have been) criticized on a number of methodological grounds. The majority are local, not national, in scope. Nevertheless, an objective look at the available evidence does suggest a number of broad conclusions about the magnitude and nature of the problem.

It is also important to recognize that the size of the homeless population depends in large part on how one defines homelessness: Who is homeless (7)? Obviously, those who

7) Interview with Cynthia Taeuber, Population Division, Census Bureau, Suitland, Maryland, March 2, 1988. Even the Census Bureau recognizes the difficulties faced in trying to

sleep in shelters, or in places such as abandoned buildings or parks, are homeless. Most studies also include families staying in welfare hotels. However, three other groups can be identified:

- Those who are "doubled-up" with friends and relatives. While some may live this way by choice, for a great many people, doubling-up is a last ditch effort to avoid living on the street.

- Those living in short-term rental accommodations. Many poor people live in SRUs rented by the week or day. When their money runs out, they sleep on the streets or in shelters.

- Those in institutional care. Many of those in hospitals and jails are without homes to which they can return when released. Indeed, police stations and hospitals often function as de facto shelters.

All three groups are similar to the more easily identified homeless population; and many individuals move between categories (8). While these groups are excluded from most estimates of the size of the homeless population, they constitute at the very least an important segment of the "at risk" population, and must be considered in devising

arrive at an accurate assessment of the homeless population. Because the Census Bureau considers the definition of homelessness to be necessarily a political one, the 1990 decennial census count will be limited to certain components of the homeless population, primarily the street and shelter populations. The count will be conducted on one night only, March 20, 1990. Demographic data will be collected on all populations; socioeconomic data on the shelter population only. Because of the limited search parameters, particularly on the street count, it is certain that the final count will underrepresent the numbers of the homeless.

8) In Chicago, about one-third of the homeless had spent some time the previous week doubled-up or in a rented room. Travelers Aid data, from eight cities, indicate that 27 percent of families with children who seek shelter assistance report spending the previous night with families and friends. One percent had spent the previous night in a hotel, motel, or boarding house. See Dr. Penelope Maza and Dr. Judy Hall, Study of Homeless Families: Preliminary Findings, Travelers Aid International, Washington, D.C., 1987, p. 2.

long-term strategies to address the problems of homelessness.

While no one knows how many homeless people there are in the United States, The National Alliance to End Homelessness is concerned that a reasonable assessment of size is needed for long-term planning. Offered here is a methodology that the Alliance believes conforms to the perceived size of the homeless population, but cautions that no estimate is entirely accurate. An examination of the causal factors involved in homelessness leads the Alliance to conclude that the number of people who are on the brink of homelessness, homeless, or cyclically homeless constitutes a tragedy far in excess of what any population figure might indicate.

Some studies have produced widely varying estimates of the size of the homeless population, depending on the data and assumptions used (see Table 1). Other estimates range from the low figure of 200,000 cited by the U.S. Department of Housing and Urban Development (HUD) (9) to the high figure of 3 million used by the National Coalition for the Homeless. Two more recent studies (10) suggest national totals higher than the HUD estimate, but lower than the Coalition figure. Both of these relied on techniques--and, for the most part, data sources--originally developed in the HUD report. However, by varying one or two key assumptions, different conclusions were reached.

The national figures presented in Table 1 are based on local estimates that have been extrapolated to the national level. As described in more detail below, local estimates vary significantly, depending on their underlying source and methodology. Furthermore, key assumptions vary as different researchers extrapolate from local to national data. Thus, in assessing the validity of the national estimates, one must consider both the reliability of the local figures and the extrapolation procedures used.

9) U.S. Department of Housing and Urban Development, "A Report to the Secretary on the Homeless and Emergency Shelters," Washington, D.C., 1984.

10) Friedman, "Permanent Homelessness in America?," Working Paper No. 2013, National Bureau of Economic Research, Cambridge, Massachusetts, 1986; and William Tucker, "Where Do the Homeless Come From?," National Review September 25:1987.

TABLE 1 National Estimates of the Homeless Population

Source	Estimate	Assumptions Used
Community for Creative Nonviolence 1980	2,200,000	Based on a small number of high local estimates. Apparently uses city populations to estimate a rate of homelessness. Applies constant rate of homelessness to the entire country.
U.S. Department of Housing and Urban Development, 1984	192,000	Applies a street-to-shelter ratio to estimates of the sheltered population.
	254,000	Based on estimates for 60 cities. Uses metropolitan population as the base. Calculates rates separate for large, medium, and small areas.
	586,000	Takes highest local estimates. Uses metropolitan population as the base. Assumes a constant rate of homelessness nationwide.
Friedman and Hall, 1987	287,000	Applies a street-to-shelter ratio to estimates of the sheltered population.
Tucker, 1986	700,000	Based on estimates for 50 cities. Uses city populations as the base. Allows rates to vary for large, medium, and small cities.

SOURCES: See footnotes 9 and 10

EVALUATING THE ACCURACY OF THE LOCAL ESTIMATES

Most local estimates produced to date have been obtained through interviews with shelter providers, advocates of the homeless, city officials, and other individuals familiar with the local situation. Yet, even in the same city, there may be considerable disagreement regarding the size of the homeless population, with high and low estimates sometimes differing by a factor of 10. In Los Angeles, for example, estimates have ranged from 19,500 to 39,000; in Dayton, from 75 to 1,000 (11). In some cases, this variation may reflect definitional differences (for example, some estimates may include households that are doubled-up, or may refer to annual and not nightly figures). However, in other cases the discrepancies reflect more fundamental differences in perception of the phenomenon.

The most systematic effort to collect and evaluate local estimates of the homeless population was conducted by HUD in 1984, and involved interviews with 3 to 12 respondents in each of 60 metropolitan areas. To incorporate widely varying estimates and arrive at a reliable range for each community, the HUD study weighted the estimates based on the respondent's knowledge of the situation and the source of his or her information (12). As a result, the HUD estimates fall between the high and low figures that were obtained from respondents in any area.

One of the major criticisms of the HUD approach was that the information it collected referred to an unknown geographic area (13). HUD attempted to obtain information on the number of homeless people in the entire metropolitan area, including the central city, any satellite cities, and the surrounding suburban ring. However, many respondents later indicated that their estimates referred to the central city alone. Thus, in using the HUD figures, the Alliance has assumed they reflect city, not metro, totals.

One way of evaluating the accuracy of the HUD estimates is to compare them to independent "counts" of the sheltered and unsheltered homeless. Unfortunately, only a handful of

11) HUD, op. cit.

12) Appendix A presents these data for each of the 60 cities. The appendix also provides data for 15 additional cities collected in 1986 and using procedures similar to HUD's.

13) Applebaum, "Testimony on a Report to the Secretary on the Homeless and Emergency Shelters," Housing the Homeless, Erickson and Wilhelm, eds., 1986.

counts have been taken, and they differ in their methodologies. However, their totals are usually lower than those provided by local observers. In Chicago (14), for example, a count of the homeless, in which interviewers searched alleys, abandoned buildings, open hallways, parked cars, and so on, produced a total of 2,344 homeless people between September and October 1985 and 2,020 between February and March 1986 (15). This compares to the HUD estimate of 19,400 and 20,300, and a maximum local estimate of 250,000 (16). In the skid row area of Los Angeles, where local informants had suggested a total of 12,000 to 20,000 homeless people, a street and shelter survey came up with a figure of roughly 3,000 (17). In other cities (Pittsburgh, Boston, and Washington, D.C.), the discrepancies are not as large, although the counts tend to be lower than the majority of local estimates (see Table 2).

What would account for these discrepancies? The unsheltered homeless are, for several reasons, very difficult to count. Many homeless people maintain a good appearance, and so are overlooked by casual observation. Furthermore, their sleeping places are often hidden due to fears of harassment or victimization. The Boston survey cautioned that "dead end alleys . . . abandoned buildings, parking garages and MBTA bus and train yards" were not investigated (18). Therefore, the counts should be regarded as minimum estimates and revised upward to allow for the

14) Rossi et al., "The Condition of the Homeless in Chicago," 1986.

15) An additional 540 were estimated to be temporarily housed in hospitals, jails, and other settings.

16) Kondratas, "A Strategy for Helping America's Homeless," 1985.

17) Hamilton, Rabinovitz, and Alschuler, "Faces of Misery: The Skid Row Homeless in Los Angeles," 1987. The 3,000 estimate does not include roughly 8,000 persons residing in downtown hotels, some of whom may receive vouchers. Approximately 2,000 individuals were located in missions, and 1,000 were counted among the street population. Other estimates for the area (from various sources) are reported in Ropers and Robertson, "Basic Shelter Research Project," 1985.

18) Boston Emergency Shelter Commission, "The October Project," 1983.

TABLE 2 Comparison of Estimates: Local Experts, HUD, and the Results of Counts

City	Low ^a Local Estimate	High Local Estimate	HUD ^b Estimate	Count ^c
Boston	2,300	5,000	3,200	2,115
Chicago	17,000	26,000	19,850	2,700
Phoenix	300	1,500	1,075	2,477
Pittsburgh	50	1,500	888	875
Washington, D.C.	3,000	10,500	4,700	2,562 ^d

^a Low and high estimates as reported to HUD interviewers.

^b Midpoint of "most reliable range."

^c Data for Boston, Phoenix, and Pittsburgh as reported by HUD. Chicago data from Peter Rossi et al., "The Condition of the Homeless of Chicago," University of Massachusetts at Amherst, 1986. D.C. data from Frederic Robinson, "Homeless People in the Nation's Capital," University of the District of Columbia, 1985.

^d Adjustments to the observed figure of 2,562 resulted in a "probable" number of 4,347 and a "possible" number of 6,454.

"concealed homeless." In the Washington, D.C. study (19) it is suggested that such adjustments would raise the "probable" homeless total by 70 percent and the "possible" total by 152 percent (20). There may also be a discrepancy between those counts that reflect a short duration of time (usually a few days) and those that encompass a period of months or a year.

Taking all evidence together, the Alliance feels that the HUD estimates provide a workable basis for developing national estimates, assuming that they apply to the central cities and not to the metropolitan areas. The HUD statistics are typically higher than the number implied by (unadjusted) local counts, suggesting they are not unrealistically low. At the same time, they are based on a number of estimates for each community, and thus serve to balance the widely varying perspectives of different service providers and other observers of the local scene. While the HUD data can be criticized on several counts, no alternative, consistent data source exists that covers a range of geographic areas wide enough to produce reasonable estimates at the national level.

CONSTRUCTING NATIONAL ESTIMATES

To obtain an estimate for the United States as a whole, we must extrapolate from the local data in some way. Most of the disagreement between the various national estimates reflects the different assumptions and extrapolation procedures used. Two basic approaches are possible: (1) extrapolations based on street-to-shelter ratios, and (2) extrapolations from city estimates. Many methodological problems are involved in extrapolations from city estimates (for example, the choice of the "true" local number), but the Alliance believes the street-to-shelter approach is even less reliable.

Extrapolations Using Street-To-Shelter Ratios: How Reliable Are They?

The first extrapolation approach relies on two types of data:

19) Robinson, "Homeless People in the Nation's Capital," 1985.

20) HUD has concluded that the most reliable range of local estimates was between 3,000 and 6,400 for the entire metropolitan area, while the "probable" figure derived from the city count was 4,347 and the "possible" total 6,454.

- local estimates of the number of people in shelters on a given night, which are then extrapolated to the national level; and

- local counts of the number of homeless on the streets, which are used to estimate typical street-to-shelter ratios.

National estimates of the total number of sheltered and unsheltered homeless people are derived by estimating the national shelter population and applying a street-to-shelter ratio to arrive at an overall count.

Using this approach, HUD derived a national estimate of 192,000 homeless people (Table 1). This was based on an average nightly shelter population of 69,000 in January 1984 and a street-to-shelter ratio of 1.79 to 1. The latter was obtained by taking the average of the ratios found in three local counts. A second ratio-based estimate was prepared by Friedman and Hall for the National Bureau of Economic Research (NBER) in 1986 (21). Their figure of 279,000 homeless people relies on an upwardly revised shelter count (22) and the use of a slightly higher ratio derived from a series of interviews conducted in New York City in 1985.

The NBER report concludes that HUD was "essentially correct" in its estimate of the homeless population size, however, the deficiencies of the ratio method are difficult to overlook. To illustrate the deficiencies, Table 3 shows the street-to-shelter ratio arrived at through counts in seven cities. The ratios vary widely, by city, within city, and by season. Thus, it is difficult to accept the basic assumption of this approach--that a single ratio can be applied nationwide.

Extrapolations from Local Estimates: Choosing the Population Base

A second, more reliable approach to estimating the size of the homeless population uses local estimates, which include both sheltered and unsheltered homeless to calculate

21) Friedman, op. cit.

22) Unfortunately, the only available data on the number of homeless people sheltered nationally, at a single point in time, are those obtained by HUD. Thus, they are the only starting point for national estimates using the street-to-shelter ratio.

TABLE 3 Variation in Street-to-Shelter Ratios

City	Date of Study	Ratio ^a
Boston	October 1983	1.29
Chicago	September 1985	1.44 ^b
	February 1986	0.35
Nashville	December 1983	0.49 ^c
(downtown area)	March 1984	0.69
	June 1984	0.78
	September 1984	0.77
New York City (NBER)	June 1985	2.23 ^d
Phoenix	March 19, 1983	2.73
Pittsburgh	June 19, 1983	1.30
Washington, D.C.	June 1985	2.49 ^e

^a Number of homeless on the street for each homeless person found in a shelter. Boston, Pittsburgh, and Phoenix as reported by HUD.

^b Peter Rossi, Fisher, and Willis, "The Condition of the Homeless of Chicago," University of Massachusetts at Amherst, 1986.

^c Ratio is based on mission to all other. Proportion of homeless actually outdoors would be smaller. See Weingarn, "Counting the Homeless," in American Demographics December:1985.

^d Friedman and Hall, "Permanent Homelessness in America," Working Paper No. 2013, National Bureau of Economic Research, Cambridge, Massachusetts, 1986.

^e Based on a study estimate that attempted to adjust for hidden homeless missed by the count. The ratio based on actual, observed homeless would be 0.39.

rates that can be projected to the national level. Most of the national estimates produced to date adopt this approach, although their results vary widely. While some of this variation can be attributed to differences in the underlying estimates, much of it occurs because of explicit and implicit assumptions about the variance of rates among different types of areas.

The high national estimates tend to assume that the rates of homelessness found within the central cities are also found in the suburbs and in small towns and rural areas. This can be criticized on several grounds. First, data developed at the local level indicate that small- and medium-sized cities have lower rates of homelessness than do larger cities (23). Second, in the sole case where separate city and suburban estimates are available, suburbs show distinctly lower rates (24). Finally, even within the central city, homeless people tend to concentrate in particular areas. For example, in the Washington, D.C. study, three-fourths of the homeless street population were found in two of the city's wards. Such concentration reflects the fact that shelters, soup kitchens, and other facilities for the homeless are found only in certain areas. Furthermore, the downtown ecology, with bus and train stations, hot air grates, abandoned buildings, and so on, offers sleeping places that are unavailable in the suburbs. Thus, procedures that assume a constant national rate, or fail to account for variations between cities and their suburbs, are likely to greatly overstate the size of the homeless population.

On the other hand, it is likely that HUD's primary extrapolation procedure understates the national total significantly. As described previously, in producing its national estimate of 254,000, HUD asked local experts to provide estimates of the total population in the metropolitan area, and used this population base (RMA) (25) to calculate a rate of homelessness for each. Observers

23) See HUD, op. cit. Homeless rates were 13 per 10,000 population in Large metro areas and 6.5 per 10,000 in small metro areas.

24) For example, estimates of the homeless population in and around Washington, D.C. work out to a rate of 41 to 100 per 10,000 in the city itself (depending on the use of observed or adjusted figures) versus an average of 9 per 10,000 in the suburban counties. See "D.C. Tries to Keep Pace with Homeless Rate," The Washington Post, November 15, 1987.

25) Rand McNally Metropolitan Areas.

later criticized this approach on the basis that the estimates represented the central cities, without the suburban areas and other cities that are included in the RMAs.

REVISING THE ESTIMATES

The Alliance has attempted to construct a revised estimate of the national homeless population on a single night. Its procedure tries to avoid typical errors by calculating the central city and suburban homeless totals separately. The underlying data for this estimate are HUD's, but the Alliance has assumed that figures refer exclusively to the central city of each metropolitan area. The resulting estimate is about 350,000 homeless on any given night as of January 1984. This is believed to be a reasonable figure, but the limitations of the data cannot be overemphasized.

First, it is assumed that HUD's national metro figure (of 210,000) is correct as an estimate of the central city homeless population on a given night in 1984 (26). To establish a suburban homeless rate, data were used from the Washington, D.C. count (the only such data available), which showed that the homeless were concentrated in downtown areas (27). In those wards within the District having more "suburban" characteristics (that is, most of their area was devoted to residential use, and more than one-third of the dwellings were owner-occupied), the rate of homelessness was one-third (32 percent) of that in the District as a whole. Therefore, the Alliance assumed that the national suburban homeless rate is about one-third of the central city rate. This yielded approximately 145,000 homeless people outside the central cities, including nonmetropolitan areas, for a total urban homeless population of 355,000. Revised rates for the estimated homeless population are as follows:

- Homeless in Central City: 210,000 at a rate of 28/10,000.
- Outside Central City: 145,000 at a rate of 9/10,000.
- Total: 355,000 at a rate of 15/10,000.

26) HUD's national estimate of 254,000 homeless was based on 210,000 in metro areas and 44,000 in nonmetro areas.

27) Robinson, op. cit.

While this approach relies on information from a single city, it is the only source available that provides detail on the geographic distribution of the homeless among different types of areas. However, the Chicago study confirms the underlying notion that homeless individuals are concentrated in certain parts of the city (28). Further verification comes from a study of the homeless in Fairfax County--the only suburban count of which the Alliance is aware. The rate obtained here was 9.7 homeless per 10,000 population, almost identical to the average suburban rate used in our estimates (29).

GROWTH OF THE HOMELESS POPULATION

The local estimates used to construct the Alliance's national estimate of the homeless population date from January 1984. However, significant changes during the last four years have occurred in the size and the composition of the homeless population.

Unfortunately, little reliable information is available on the growth of the homeless population. The U.S. Conference of Mayors, after conducting a survey of city officials, suggests that the demand for shelter has been increasing at a rate of about 20 percent per year (30). However, increased demand may simply reflect the fact that a higher proportion of the homeless now seek shelters. In Boston, for example, where the homeless on the streets and in shelters were counted in 1983 and 1986, the total figure was only slightly higher in 1986 (3.5 percent), but a much

28) The Chicago researchers asked local police and organizations, such as the Coalition for the Homeless, to assist in classifying census blocks as to the probability of locating homeless persons. Only 6 percent of the blocks were classified as having some significant chance of having homeless persons on them in the dead of night.

29) Goplerud, "Homelessness in Fairfax County," George Mason University, 1987. The 9/10,000 Fairfax rate is close to one-third of the D.C. city rate (41/10,000) using unadjusted figures from the D.C. study. It is one-tenth of the rate (100/10,000) obtained after adjusting for "concealed" homeless within city boundaries.

30) Shelter demand was reported to have increased by an average of 20 percent in 1986 and by 21 percent in 1987. See U.S. Conference of Mayors, The Continued Growth of Hunger, Homelessness, and Poverty in America's Cities, Washington, D.C., 1986 and 1987.

higher proportion were in shelters (31). The rate of increase implied by the Boston numbers would be 1 percent per year, or approximately the national growth rate for the general population.

Given the limitations of available data, it is difficult to verify the reliability of either of the two alternative 1988 estimates--368,000 (which assumes an increase of approximately 1 percent per year based on overall population trends) versus 736,000 (which assumes an annual increase of 20 percent). However, given widespread consensus that substantial growth has occurred in the size of the homeless population, the higher (736,000) figure provides an upperbound estimate of the maximum number of homeless people at a given time as of early 1988.

The studies noted above also suggest important shifts in the composition of the homeless population. In Boston, for example, the number of children increased from 138 to 376 over the period of the study, or by about 40 percent per year. Shelter providers surveyed by the U.S. Conference of Mayors also consistently report that families are the fastest growing group among the homeless population. On average, local officials reported that family members constituted 28 percent of the homeless population in 1986 and 33 percent by 1987 (32).

HOMELESSNESS OVER THE COURSE OF A YEAR

As noted earlier, estimates of the homeless population refer to a given point in time. Of perhaps greater relevance for many policy decisions is the total number of persons who are homeless over the course of a year. If homelessness is a short experience for most, then the total number of people homeless over the course of a year will be many times greater than the number of homeless people at any point in time. For example, if every homeless person was homeless for just 1 month, the annual total would be 12 times greater than the count for any particular day.

31) City of Boston, "Making Room: Comprehensive Policy for the Homeless," 1986. Of 2,767 homeless in 1983, 57 percent were in shelters, as compared with 76 percent of 2,863 in 1986. The study cautions that this does not necessarily mean that the total number of homeless in Boston has stabilized during the three-year period.

32) U.S. Conference of Mayors, op. cit.

In Chicago, researchers asked both street and shelter groups how long they had been homeless. On the basis of this information, they estimated:

- approximately 2,200 persons were homeless at any one point in time;
- between 3,000 and 3,800 additional persons became homeless over the year; and
- a total of between 4,000 and 6,000 persons were homeless sometime during the year.

The Chicago estimates make a number of simplifying assumptions that tend to overstate the annual rate. For example, they assume that "new" entrants become homeless only one time during the year--an assumption that is clearly incorrect, given the observed tendency of at least some segments of the population to move in and out of homelessness at relatively frequent intervals. However, as shown in Table 4, the available studies suggest that Chicago has a smaller proportion of short-term homeless people than many other cities; and the greater the size of the short-term homeless group, the higher the annual figure. Thus the Chicago overstatements may be largely self-canceling. Applying the Chicago results to a national nightly estimate of 736,000 yields an upperbound estimated annual total of between 1.3 million and 2 million homeless people.

CHARACTERISTICS

A discussion is warranted of the homeless population subgroups and some of the demographic characteristics that cut across the population as a whole, but a few words of caution are necessary. An examination of subgroups seeks only to describe some of the broadest trends in the population in order to identify particular housing needs. It is not a national profile, and in any given locality one would expect to find a population greatly at variance with what is described herein. Also, these subgroupings are descriptive only. In absolutely no sense are the factors discussed to be considered causal. The causes of homelessness cannot be sought in the characteristics of the homeless.

Two basic sources of information reveal characteristics of the homeless. The first consists of local studies in which homeless individuals are identified and interviewed. The second source of data about the homeless population is that of shelter providers and other key informants.

TABLE 4 Length of Time Homeless, by percentage

Study ^a	Less Than One Month	More Than One Month
Austin	11	47
Boston	9	60
Chicago	12	39
Las Vegas	42	20
Los Angeles	23	49
Minneapolis	26	24
New York	21	56
Ohio	40	23
Phoenix	31	27

^a Statistics for places other than Austin, Chicago, and Ohio were compiled by HUD. (See "Report to the Secretary on the Homeless and Emergency Shelters.") Austin data are from Baumann et al., "The Austin Homeless," Chicago data from Rossi et al., "The Condition of the Homeless of Chicago;" and Ohio data from Roth et al., "Homelessness in Ohio: A Study of People in Need."

The problems of compiling a description based on these sources are substantial. Shelter provider estimates are typically based on those homeless who use services; clearly there are some homeless who avoid all contact with shelters or other sources of help. While interview-based studies often include respondents drawn from the streets, soup lines, welfare hotels, or other places that would provide a more broad-based picture of the population, coverage (as well as the operating definition of homelessness) varies from study to study.

For example, two recent studies (Chicago and Los Angeles Skid Row) (33) provide maximum coverage of street and shelter populations, though neither includes residential hotels and one is limited to a small portion of the downtown area. Other studies cover shelters only (Seattle) and streets only (Austin), and one (Ohio) includes households temporarily residing with families or friends (34). As a result of the different populations surveyed, true patterns are difficult to ascertain.

Despite these problems, local homeless studies do provide a starting point for identifying significant subcategories of the homeless population. This kind of information allows us to begin to design appropriate intervention and prevention strategies. The following discussion provides a brief overview of some subgroups of the homeless population, followed by a look at the general demographics of the homeless population. The latter is based on 13 local, survey-based studies and 5 studies that rely on provider information. (These data are presented in Appendix B.)

Families

Based on available information, estimates for the share of homeless individuals in families range from 25 to 33 percent. Estimates from some shelter providers are considerably higher, but families tend to be found among the shelter population rather than on the street. It also should be noted that estimates of the percentage of homeless

33) Rossi et al., "The Condition of the Homeless of Chicago," 1986; and Hamilton, Rabinovitz, and Alschuler, "Faces of Misery: The Skid Row Homeless in Los Angeles," 1987.

34) Bauman et al., "The Austin Homeless," 1985; King County, Washington, "Emergency Shelter Study," 1984; Roth et al., "Homelessness in Ohio: A Study of People in Need," 1985.

people in families vary considerably across cities, with proportions as high as 50 to 65 percent reported in cities such as Providence, Trenton, and New York City (35). Averaging provider estimates across cities, the U.S. Conference of Mayors arrived at a proportion of 28 percent in 1986 and 33 percent in 1987. Service providers almost invariably report that families are the most rapidly growing segment of the homeless population.

Initial reports of family homelessness focused on the depression-era image of laid-off workers traveling with their families in search of a new start. The intact, middle-class household suddenly thrust into homelessness by economic circumstances dominated early media reports, and providers continue to identify the "new poor" as an important segment of their service populations.

The profile of family homelessness offered by the Chicago study is of a relatively small segment (12 percent) of the population, predominantly black and found primarily in shelters. These women and their children appear to have fled from untenable living arrangements to strike out on their own. According to the study, these women typically remain homeless for a short period of time (36).

On the other hand, a study of residents of a New York City welfare hotel (37) indicates that family homelessness may be of longer duration. Here, primary reasons for current homelessness are eviction (48 percent, including eviction by a primary tenant) and displacement due to condemnation or fire (40 percent). Eighty-seven percent report public assistance as their main source of income. Just over half of the families have lived in a hotel for six or more months, and 10 percent have lived in the hotel for

35) U.S. Conference of Mayors, op. cit.

36) It is important to note that the Chicago study excluded residential hotels and other places where additional homeless families might be found. Moreover, a broader definition of homelessness could result in greater numbers in this group. For example, Ohio included in its survey a segment of the population defined as "resource people" who were located in cheap hotels or found temporarily staying with families or friends. The largest proportion of females was found in this group.

37) Simpson et al., "Struggling to Survive in a Welfare Hotel," 1984.

more than a year. The average length of stay, at the time of the study, was 11 months (and is closer now to 13 months) (38).

In Boston, Ellen Bassuk has profiled homeless mothers as follows: single, black, 29 years old, with 2.4 children, several years of high school education, and poor or no work histories. Almost all (96 percent) are supported by AFDC and 41 percent have been on AFDC for more than 4 years. More important, about one-third have been chronically homeless for the last 5 years, moving between relatives or friends, welfare hotels, and other shelters.

Mentally Ill

Many studies have attempted to establish the proportion of the homeless population evidencing mental health problems. Although the attempts vary, the Alliance estimates that about one-fourth of the homeless population suffers from severe or chronic mental problems. Some data show that the proportion of family members observably suffering from mental illness is low (5 percent) when compared to the single population (32 percent) (39).

Although the Alliance has examined no data that relate length of homelessness to mental health status, we could expect this group to be counted among the relatively long-term homeless population.

Veterans

Based on local studies, a substantial proportion of the homeless are veterans. Expressed as a proportion of the sample, the range is 22 to 46 percent for the studies reported by Robertson (40). Expressed as a proportion of the male sample, homeless veterans account for between one-third and one-half in most studies reported. Where Vietnam-era veterans are distinguished, this group tends to account

38) Bassuk, "The Feminization of Homelessness," keynote address given at The Shelter, Inc., Benefit, June 11, 1985.

39) New York State Department of Social Services, "Homelessness in New York State: A Report to the Governor and the Legislature," 1984.

40) Robertson, "Homeless Veterans: An Emerging Problem?" The Homeless in Contemporary Society, Bingham, et al., eds., 1987.

for between one-fourth to one-third of all homeless veterans.

It appears that few homeless veterans receive any benefits from the Veterans Administration (for example, 4 percent in Los Angeles). Robertson found that veterans tend to have been homeless for shorter periods of time, are slightly older than other homeless people, and report higher rates of hospitalization for psychiatric reasons.

Youth

Runaway youth constitute a small portion (4 percent according to the U.S. Conference of Mayors) (41) of the homeless population and one that has very specific shelter and service requirements.

Migrants

Migrant families or individuals, particularly those between jobs, constitute a small, as yet unknown portion of the homeless population.

Disabled

A small percentage of the homeless are physically handicapped or disabled. While their number is not large, they do require certain architecturally modified accommodations.

Other Factors

The following characteristics of the homeless population were derived from the studies cited in Appendix B.

Sex

The majority of the homeless are male. The highest proportion of men are found in skid-row populations (for example, 84 percent in Nashville) (42) and on the street. By contrast, women are more likely to be shelter users or to be housed in welfare hotels. Women are also much more

41) U.S. Conference of Mayors, op. cit.

42) Nashville data reported in Weingarn, "Counting the Homeless," American Demographics December:1985.

likely to be part of family groupings, with only a very small proportion of the overall homeless population made up of single (that is, unaccompanied) women. Based on evidence from local studies, and HUD's 1984 shelter survey, it is likely that single males account for roughly two-thirds of the population, and single females account for between 10 and 15 percent.

Age

Overall, the studies consistently portray a population that is predominantly made up of persons in their middle years. The median age is reported to be around 35 in most studies. Although elderly people are among the homeless, they are underrepresented, possibly due to their entitlement to federal Supplemental Security Income (SSI), which provides them with some income.

Race

Blacks and minorities are strongly overrepresented among the homeless. While the minority composition varies by city, whites and Asians are typically underrepresented. At the same time, some studies (for example, Chicago) show significant racial differences by age, with a higher proportion of whites to be found among the older (over 40) homeless population.

Income

A substantial proportion of the homeless indicated they had worked for pay during the last month (39 percent in Chicago) or had full- or part-time jobs (11 percent in Boston). The U.S. Conference of Mayors reports that, in the 28 cities it surveyed, an average of 22 percent of the homeless are employed in either full- or part-time jobs. Nevertheless, even when employed, the income of homeless people is very low.

Receipt of public assistance among the homeless is also reported to be low in most localities. One of the highest rates reported is Chicago (35 percent). In Chicago, the dominant form of public assistance is General Assistance (GA) (22 percent), followed by AFDC (6 percent), Supplemental Security Assistance (6 percent), and disability. While the study showed that the homeless do

tend to apply for benefits (43), and that rejection rates are low, the programs are not providing long-term support. Of those who have at one point received assistance, only about half are currently receiving benefits. In Chicago, the average income of homeless persons, from all sources, was found to be \$168 per month. Half of the homeless live on \$100 per month or less.

Duration

The studies show that slightly over half of all homeless people have been homeless for less than one year. They also show that families tend to be found among the short-term group. It is important also to note that many are beginning to draw more attention to the "cyclical" nature of homelessness among poor people, and to explain it is as a part of their "makeshift" adaptation to chronic housing shortages and low disposable incomes.

Rural

Most available studies of the homeless focus on urban populations. Relatively little data are available on rural homelessness, however, it is an equally serious problem of growing dimensions. One of the few interview-based studies to include rural populations is that conducted in Ohio (44). As compared to urban respondents, the nonurban homeless population was found to be somewhat younger and to contain a higher proportion of females and lower proportion of blacks (45). The rural population also contained fewer long-term homeless people (defined as being homeless for two or more years). Rural homeless people were less likely to be found in shelters, and more likely to reside with friends or relatives. Data analyzed by the Housing Assistance Council (based on surveys of rural community action agency directors and other local experts) portrayed a population consisting of numerous subgroups including migrant workers, displaced renters, bankrupt farmers, Indian reservation families, and laid-off workers. As in urban areas, respondents indicated

43) The study estimated that 95 percent of those ostensibly eligible for AFDC had applied and about 70 percent of those eligible for GA had done so.

44) Roth, "Homelessness in Ohio: A Study of People in Need," Ohio Department of Mental Health, 1985.

45) In the Ohio study, rural and mixed urban and rural counties are typically combined for reporting purposes.

substantial increases in the size of the rural homeless population, with families constituting a rapidly growing segment (46).

Substance Abuse

An estimated one-fourth of the entire homeless population may suffer from problems relating to substance abuse. Based on the Chicago study, substance abuse affects proportionately more men than women, occurring more frequently among older men (44 percent) but also among younger men (35 percent). Many substance abusers live with relatives or friends prior to becoming homeless, and it appears that the immediate cause of their homelessness is rejection by relatives or friends no longer willing to harbor them.

SUMMARY

The face of homelessness is the face of poverty in America today. Homeless people live in families and alone; have jobs and are unemployed; are educated and uneducated. In spite of all these differences, they share two things: they are very poor and they are without housing.

Section II discusses the housing crisis that has caused homelessness and offers strategies to help house the homeless.

46) Housing Assistance Council, "The Homeless Crisis from a Rural Perspective," forthcoming.

II

HOUSING THE HOMELESS

A variety of factors have contributed to the increased incidence of homelessness. Two of the primary causes are:

- increasing rents and the growing number of households unable to afford nonsubsidized rents, and
- increasing imbalances between the demand for and supply of low income-housing.

Homeless individuals, to be sure, have special needs, but the causes of homelessness do not relate to any one type of social or physical condition. Rather, the actual causes of homelessness relate more to declining incomes, increasing rents, and the lack in number of low-income housing units.

Increases in real rents have exceeded the growth in real income, and gross rent as a percentage of income is at its highest level in two decades. Only one in four renter households with incomes at or below the poverty level live in public or other subsidized housing, and there is evidence that the growing rental payment burden has contributed to the rise in homelessness (47).

These facts, combined with the imbalances between the demand for and supply of low-income housing, more or less explain the homeless condition. What they do not explain is the rationale behind certain changes in national housing policy, the severe reductions in federal spending for housing, and the lack of appropriate response mechanisms.

47) The State of the Nation's Housing 1988, Joint Center for Housing Studies of Harvard University, Cambridge, Massachusetts, 1988, pp. 1, 10, 14. This study estimates that the growing rental burden contributed to the recent rise in homeless families with children. From 1974 to 1987 the number of single-parent families nearly doubled. At the same time, the median income of young single-parent renter households declined by 34 percent to \$7,721; their rent burden increased from 34.9 to 58.4 percent.

What has stirred the public conscience, made homelessness the critical issue of the 1980s, and moved localities to find creative solutions to the housing problem? It is the knowledge that the number of low-income renter households seeking affordable housing has outstripped the theoretically available supply of units (48). America faces a shortage of affordable housing, and for some of those working in the field of low-income housing, homelessness has proven to be a "radicalizing experience" (49). At present, 63 percent of all poverty-level households are living in rental housing. As real incomes decline, those with the least ability to compete risk falling out of the housing market entirely (50); they become homeless.

The lack of affordable housing is a problem of crisis proportion. The National Alliance to End Homelessness is one of several organizations to note this fact. The recommendations offered in this report relate to housing the homeless: those men, women, and children living in the streets, shelters, welfare hotels, and also on the brink. The dimensions of the nation's housing crisis can only briefly be addressed in this report. A fuller understanding of the issues and an in-depth examination of policy alternatives are contained in recently released reports of two congressionally mandated task forces: the National Housing Task Force, chaired by James H. Rouse, and the National Low Income Housing Preservation Commission, co-chaired by Carla A. Hills and Henry S. Reuss (51).

48) James W. Rouse, chairman and chief executive officer, The Enterprise Foundation, Columbia, Maryland, testimony at a joint hearing of the Senate and House Housing Subcommittees, April 12, 1988, p. 3.

49) Interview with Barry Zigas, president, National Low Income Housing Coalition, Washington, D.C., March 4, 1988.

50) Thirty-two million of the 241 million people living in the United States in 1986 lived below the poverty line. In 1986, one-fourth of all the full-time jobs (24 million positions) did not pay enough to raise a family above the poverty line of \$11,203. See A Decent Place to Live: Report of the National Housing Task Force, Washington, D.C., March 1988, p. 5.

51) See A Decent Place to Live: Report of the National Housing Task Force, *op. cit.* See also, Preventing the Disappearance of Low Income Housing: The Report of the National Low Income Housing Preservation Commission, Washington, D.C., April 1988.

Following is a summary of some of the Alliance's observations on elements of the housing issue; specifically, funding sources, service providers, and tenant assistance measures.

HOUSING: FEDERAL ISSUES

The 1949 Housing Act established a national goal of affordable, decent, safe, sanitary housing for every American family. Yet, on any given night, 736,000 individuals are homeless; at least as many, probably more, are doubled up. Six million others remain "at risk" of homelessness by virtue of their economic circumstance. Many dwellings are in substandard condition (52) and about half of the inexpensive units are occupied by higher-income households (53). Clearly, America has fallen short of its commitment: new initiatives are needed as well as greater efforts through existing programs.

The homeless by definition are without permanent residence, and the magnitude of the housing problem requires that the federal government become more actively involved in its solution. The policy of HUD under the Reagan Administration has been to respond to the housing crisis with programs that focus almost exclusively on tenant-based subsidies (vouchers). While such programs alleviate some of the rent burden, they do little to create additional supply at a time when availability falls short of demand. An estimated 5.5 million new units of housing are needed to house the poor (54), but such housing will never be built unless certain housing policies are either modified or reversed.

52) For example, Chicago estimates that one in seven housing units in Chicago is in substandard condition. See Judith Walker, "Local Housing Policies Affecting Homelessness," September 1987. It is estimated that, overall, 5 million renters and 4.5 million homeowners live in structurally inadequate, substandard housing. See The State of the Nation's Housing 1988, op. cit., p. 16.

53) James W. Rouse, op. cit.

54) Sandra Newman and Ann Schnare, Subsidizing Shelter: The Relationship Between Welfare and Housing Assistance, Report No. 1, The Urban Institute Press, Washington, D.C., 1988.

Public Housing

RECOMMENDATION: The federal government should provide adequate funds for the maintenance and physical rehabilitation of public housing as well as its expansion.

About 1.35 million units of public housing constitute the nation's largest single holding of housing for the poor (55). Although subject to politicization, inadequate funds for maintenance and capital improvement, and continuing bad publicity, public housing must be recognized as a national asset. There is simply no way to replace these housing units for the poor, and the periodic efforts to sell or otherwise dismantle public housing should be resisted. In fashioning a sensible housing bill, priority should be given to preserving, upgrading, and expanding the nation's current inventory of permanent, publicly owned, low-income housing units. The Alliance believes renewed attention to public housing is in order. Public ownership obviously eliminates the continued recycling of privately owned housing and assures long-term use of properties for low-income tenants.

Preservation of Existing, Subsidized Stock

RECOMMENDATIONS: The number of housing units currently available under federal project assistance and other housing programs should not be reduced.

The federal government should give priority to the provision of those incentives that encourage owners of assisted properties to extend their low-income use.

Where the current owner wishes to sell, the federal government should develop financing mechanisms by which assisted projects can be purchased and can retain affordability. Local and state governments also should make every effort to preserve assisted stock either through purchase or by providing the financing for private sector projects that preserve low-income use.

55) The scope of this report does not include an in-depth analysis of public housing issues.

Households displaced by the loss of housing that cannot be retained for low-income use should be assisted in finding alternative affordable, comparable housing.

Currently, about 4 million households benefit from housing subsidies provided by the U.S. Department of Housing and Urban Development. These include about 1.3 million households residing in public housing and another 800,000 subsidized with Section 8 certificates and vouchers. The remainder--nearly 2 million households--live in units that were built under a variety of construction and rehabilitation schemes over the past three decades (56). These privately owned, federally subsidized projects account for nearly half of the currently assisted housing stock. Yet, up to three-fourths of these units could be lost for low-income use over the next 20 years. These include:

- Units eligible for prepayment. These units were developed under HUD and Farmers Home Administration (FmHA) mortgage subsidy programs, primarily in the late 1960s and early 1970s. The mortgages, which typically were written for a period of 40 years, contain provisions for prepayment (and termination of use restrictions) after 20 years. Up to 645,000 units will become eligible for prepayment over the next 20 years (57).

- Units eligible for opt-out or with subsidy contracts slated to expire. Most of these units were developed under the new construction and substantial rehabilitation components of the Section 8 program. Early contracts permit owners to terminate them after five years. Additionally, subsidy contracts for many units will expire during this period. Altogether, 774,000 units could be lost by 2005, assuming that all eligible owners opt out of their contracts and expiring subsidies are not replaced or renewed (58).

56) Section 8 New/Rehab/Mod Rehab; Section 236, Section 221 Below-Market Interest Rate (BMIR); FmHA Section 215; and market rate FHA with rental subsidies.

57) Issues Facing the Assisted Housing Stock, prepared for the National Corporation for Housing Partnerships, by the Urban Institute, Washington, D.C., p. 4.

58) Ibid.

● Older FHA projects. The losses previously discussed primarily reflect removals from the low-income stock based on more profitable uses of the property. However, a segment of the stock is more likely to be lost because of physical deterioration or financial problems. The expiration of Section 8 subsidies could be an important contributing factor to this loss.

Overall, the potential exists to lose as many as 1.4 million units through conversion to higher-income use, expiration of existing subsidies, or physical and financial deterioration over the next 20 years. Incentives to encourage owners of assisted properties to extend low-income use are listed in Section 224 of the Housing and Community Development Act of 1987. Among the incentives are: measures to increase the rate of return on investment; revisions to the method of calculating equity; increased access to residual receipts accounts or excess replacement reserves; provision of insurance for a second mortgage; financing of capital improvements; and so on.

New Construction

The radical cutback in funding authorizations for assisted housing and the adverse effects on low-income housing of the Tax Reform Act of 1986 have led to a near cessation of new construction for low-income housing. From 1976 until 1982 approximately 1 million units of low- and moderate-income housing were constructed under the Section 8 program; in 1988, it is unlikely that more than 25,000 new units will be built.

The National Housing Task Force has made a series of recommendations for the development of a new housing policy, and the initiation of new construction approaches. The Alliance strongly supports these recommendations.

Reassessing Welfare Allotments

RECOMMENDATION: The level of public housing assistance through HUD, FmHA, and the U.S. Department of Health and Human Services (HHS) should be reassessed to take into account income levels (including benefits) and real housing costs (including utility costs). Housing benefit levels should then more closely match these real costs. In addition, HUD, HHS, and other agencies should be strongly encouraged to improve their coordination in providing housing assistance.

Under the HUD voucher programs, households are required to pay no more than 30 percent of their incomes for rent (59). HUD pays the difference between this amount and the Fair Market Rent (FMR) for the unit. However, because such programs are costly, only a small proportion of the households eligible for assistance can be served. Among very low-income households, for example, only about 17 percent receive HUD subsidies.

A second, and often overlapping, source of subsidy is that provided under public assistance programs. According to recent research, the major welfare programs essentially guarantee that program recipients will live in substandard housing and similar individuals in different locations will not be treated equally. Nationally, AFDC recipients receive housing allotments that average only about 49 percent of the cost of a modest unit. SSI and GA recipients receive allowances that cover 65 and 67 percent, respectively (60). The fact that a significant proportion of the homeless include families supported by AFDC should provide some indication that benefits under this program are inadequate to cover reasonable housing costs. Moreover, benefits vary widely from state to state, with housing allotments in some areas falling as low as 29 percent of the rent for a modest unit.

A coordinated housing program appears essential. For example, in one fiscal year, a total of more than \$21 billion was allocated for housing assistance under various public assistance and housing programs administered by HUD, HHS, and other governmental agencies.

HOUSING: STATE AND LOCAL ISSUES

Single-Room Occupancy

RECOMMENDATIONS: Municipalities should be encouraged to save that portion of their housing represented in single-room occupancy buildings.

59) Under the voucher program, households may elect to pay a greater proportion to live in a unit that rents above the Fair Market Rent for the area.

60) Newman and Schnare, op. cit.

The eligible use of Section 8 funds for residents of SRO housing should be expanded.

Another diminished category of housing is the single-room occupancy hotel. SROs traditionally accommodate single men and women, including those with substance abuse problems and the mentally ill. Considered to be substandard housing until recently, many of these hotels were demolished or converted as a result of downtown expansion and redevelopment.

Between 1970 and 1983, the number of SROs in New York City has declined by 89 percent; and in Atlanta by 88 percent. Overall, between 1974 and 1983, 896,000 SROs have been lost (61). According to Andy Raubeson, director of the SRO Housing Corporation in Los Angeles, "Displacement from SROs will surely lead to homelessness. There is no cushion."

SRO-type housing can provide a viable housing option for individuals with extremely low incomes and, according to Raubeson, good management and a sound tenant selection process can make SROs the housing of choice (62). As a result, several large cities have developed SRO preservation programs and are using HUD and local rehabilitation funds to upgrade existing structures.

Well-maintained and managed SRO housing has several benefits: it is conveniently located, usually near transportation hubs; it is economical; its rents are generally affordable to those whose incomes are derived from benefits; and it is well-suited to special needs populations since services can be located within the facility and the zoning constraints that face community-based facilities are absent. SRO housing generally consists of clusters of single rooms (with or without partial baths) with shared bathrooms and lounge areas, and community kitchens. Once lost, SRO housing is difficult to replace.

61) "Help for the Homeless," Newsweek, April 11, 1988, pp. 58-59. The Reagan Administration's proposed 1989 budget does not include requests for funding for either Section 8 assistance for SROs under the McKinney Homeless Assistance Act or the Section 8 SRO Mod/Rehab Program. However, Congress may authorize up to \$400 million for the Section 8 SRO Mod/Rehab Program.

62) Interview with Andy Raubeson, director, SRO Housing Corporation, Los Angeles, California, March 8, 1988.

Zoning

RECOMMENDATIONS: States and localities should be encouraged to establish zoning techniques that encourage rather than discourage mixed-income use of land. In general, exclusionary zoning should be discouraged and where appropriate, inclusionary zoning, designed to promote the development of low-income housing, should be encouraged.

States should be encouraged to pass laws that facilitate establishment of group homes, including the designation of community residences as single-family dwellings for all local zoning purposes.

Exclusionary zoning practices can be used to curtail establishment of multi-unit or multi-family housing units of the type necessary to provide affordable housing to low-income and homeless people. While states and localities plan land use through zoning, this process should not be used to exclude a reasonable amount of housing for homeless and low-income people.

Design and Regulatory Changes

RECOMMENDATIONS: Federal government-sponsored enterprises engaged in housing finance should discourage lenders, including state and local housing finance agencies, from imposing unduly restrictive construction standards as part of the financing process.

Local building codes, while assuring safe housing, should be designed in such a way as to take into account low-income housing needs, preservation of housing stock, and the actual state of existing, occupied stock.

A model code for rehabilitation is needed to provide guidance to local authorities. Such a code should distinguish between repairs and substantial rehabilitation. In the case

of repairs or modest rehabilitation, the code should only prohibit alterations that produce a net decrease in the safety and livability of the unit. For substantial rehabilitation, the code should only dictate the requirements for construction actually performed and should not mandate changes in other aspects of the unit.

There should be coordination among the standards for existing housing, for rehabilitation grant programs, and for building codes.

Building codes and other housing quality regulations are enacted to protect the health and safety of the public but, by raising the cost of housing and constraining the housing options available, they may cause some people at the bottom of the income scale to find housing less available and more expensive. The result may be, ironically, less adequate housing and increased homelessness. On the other hand, housing quality standards are an important and hard-won element of the health, safety, and quality of life enjoyed in the United States. They should not be sacrificed for some short-term cost reductions. Continuing attention needs to be focused on more affordable housing types and on construction and design approaches that reduce unit costs.

HOUSING PROVIDERS

RECOMMENDATION: The recommendations of the National Housing Task Force and National Low Income Housing Preservation Commission should be implemented as they relate to the housing needs of low-income families and the homeless.

Role of States and Financing Agencies

To the extent that supply problems are localized, it is appropriate that states and localities initiate action on their own behalf. States and localities have responded by adopting a more aggressive role in the development of supply-oriented programs, including low-income housing funds to finance construction and rehabilitation.

Almost all commissions and groups analyzing housing problems have concluded that states and localities must play an even greater role in stimulating housing change. Coordinated partnerships between the federal government and

state and local entities are needed. The National Housing Task Force gives suggestions as to how such partnerships can be forged and implemented.

Role of Nonprofits

The provision of housing alone will not satisfy the complex social needs of the existing homeless population. The issue is one of effective service, and nonprofit organizations have been better able to provide combined housing and support services. Such programs may not always be as efficient, in terms of scale, but they almost always result in well-targeted allocations to the poor (63).

The homeless population constitutes the poorest of America's poor. Given existing conditions, including changes in the 1986 Tax Reform Act, it is unlikely that for-profit developers will find the present rate of return on investment sufficient to engage in large-scale activities on behalf of the homeless. Current subsidies are considered too meager to attract private capital. Until existing law changes, nonprofits, by necessity, will be one of the primary providers of low-income housing (64).

While generally supportive of nonprofit organizations, several commentators have noted that some nonprofits, for all their good intentions, are often poorly managed, devoid of necessary capital, and unable to deal with the inefficiencies of scale. Efficiency, however, becomes less of an issue if one accepts that the mission of a nonprofit is to provide effective, comprehensive services to the homeless and other low-income groups. Additionally, nonprofits are committed to maintaining developed units for low-income use in perpetuity.

Role of the Private Sector

It is, of course, unrealistic to assume that 5.5 million new units of low-income housing can be built by

63) Sarah Becker and Donna Glenn, Off Your Duffs & Up the A\$\$ets: Common Sense for Non Profit Managers, Farnsworth Publishing Co., Inc., Rockville Center, New York, 1985, p. 215.

64) H.R. 3891 was introduced on February 2, 1988 in an effort to encourage increased nonprofit sponsorship of cost-effective, community-based programs for housing rehabilitation and development. Such programs, to include unions and churches as service providers, are intended to assist low- and moderate-income families.

nonprofits alohe. Even the strongest advocates of nonprofits recognize that nonprofits can supply only a small number of annual units required, and that conclusion appears as correct today as 20 years ago. The Kaiser Commission in 1968 stated that to meet national housing goals, the involvement of the private sector was required. The private sector must be viewed as an ally in building and maintaining low-income housing.

SERVICE FOR TENANTS

There is an ever increasing concern that displacement could swell the ranks of the homeless well beyond current estimates. For example, the General Accounting Office (GAO) estimates that as many as 1.7 million units of federally assisted housing could be lost by the year 2005 (65). Of particular concern is the existing stock of Section 236 and Section 221(d)(3) housing.

The National Low Income Housing Preservation Commission has found that, in the next 15 years, over 80 percent of the Section 236 and Section 221(d)(3) housing units will be lost either through default or prepayment of mortgages. Ninety percent of those displaced by such actions have annual incomes below 80 percent of their locality's median income (66). These tenants may find it difficult to absorb the moving costs and are, therefore, "at risk" of homelessness.

The National Housing Preservation Task Force has recommended that "in the event of prepayment, the tenant should be permitted to remain in place at no increase in rental cost to the tenant, except for regulatory reasons, until replacement housing of comparable cost and quality is available" (67). While there are compelling arguments in favor of such recommendations, owners and others feel their implementation would be in violation of the owner's contractual rights.

65) Barry Zigas, "Homelessness and the Low Income Housing Crisis," National Low Income Housing Coalition, Washington, D.C., 1987, p. 1.

66) Statement of Carla A. Hills and Henry S. Reuss, co-chairs, National Low Income Housing Preservation Commission, Washington, D.C., April 27, 1988.

67) The Preservation of Low and Moderate Income Housing in the United States, The National Housing Preservation Task Force, Washington, D.C., 1988, p. 4.

Eviction Assistance

RECOMMENDATION: States should be encouraged to establish cost-effective eviction assistance programs.

For many people, homelessness begins with eviction. For example, in New York City, 500,000 eviction cases are initiated in the Housing Courts each year and, on average, 25,000-27,000 households are displaced through warranted evictions. Many of those evicted are public assistance recipients. Since 1969 the number of low-income households displaced through the eviction process has increased by 93 percent (68).

States, such as New Jersey and Massachusetts, have found that programs that prevent eviction, through financial and social service assistance, are highly effective in human and economic terms. In Massachusetts, the state will pay up to four months rent and utility arrears, provide landlord/tenant mediation and offer counseling in order to prevent eviction. The Massachusetts Department of Public Welfare has found that the average rent arrearage payment is \$700. This compares to an average of \$6,000 to house a homeless family in a hotel or motel. By keeping low-income people in existing, affordable units, states can reduce their costs and prevent homelessness.

Housing Counseling

RECOMMENDATION: The federal government should institute a program of support for housing counseling agencies (existing HUD-certified agencies and others) with strong state and local participation in design and monitoring.

68) Brent Charmin, 5 Minute Justice, Report on the Monitoring Subcommittee Citywide Task Force on Housing Court, November 1986. At present, the average number of households evicted each year is 25,000 - 27,000. Depending on the size of the household, the actual number of people evicted is even greater. By comparison, the average number of households evicted in 1969 was 14,000; in 1973, 17,000; and in 1974, 18,500, with the peak in 1982 of 30,700. Since 1982, the number has fluctuated between 25,000 and 27,000 households.

As of 1984, there were approximately 600 public and private nonprofit housing counseling agencies. Approximately one-third of these received HUD funding to provide services to HUD program participants. Many more social service agencies provide housing counseling as part of their case management or other services. To the extent that they deal with tenants (most people become homeless after having rented, rather than through mortgage default), such agencies can provide a valuable service by preventing eviction and potential homelessness.

SPECIAL NEEDS OF THE HOMELESS

RECOMMENDATIONS: It is recommended that those who work with the homeless adopt a case management system. Such a system would recognize the complex needs of clients and could deliver, in an integrated way, a full range of assistance which includes day care, job training, job referral, health care, housing assistance, counseling, rehabilitative services, assistance in obtaining benefits, and legal aid.

Comprehensive services should be provided to those families and individuals who reside in transitional housing.

HUD should work more closely with mental health agencies to design and fund housing units in which adequate services are easily and effectively delivered to the mentally ill.

Federal, state, and local governments should work together to ensure adequate funding for community-based mental health services that are required by the deinstitutionalized and never-institutionalized.

Federal, state, and local governments should be encouraged to expand their funding programs for residential and outpatient detoxification and treatment centers for homeless substance abusers. Operation of such facilities should be targeted to nonprofits.

Housing, while the fundamental issue of homelessness, is not the only need of homeless people. The majority of homeless people need an array of social services to help them stabilize. For those who previously have maintained successful households, but lost their housing through some external cause, such services are temporary. Others, such as the mentally ill, require immediate assistance and a package of permanent services to maintain them in long-term living situations. Between these extremes lies the whole range of the homeless population, struggling with housing shortages and low incomes. The homeless require more than just emergency relief.

BENEFITS

RECOMMENDATIONS: Federal, state, and local governments should improve their coordination of benefit and service delivery to the homeless. This could include eliminating paperwork and other barriers to the receipt of benefits (such as address or birth certificate requirements) and coordinating the eligibility standards for the various welfare programs. The Alliance encourages the formation of state coordinating councils (such as those in Ohio and Massachusetts) that encourage and monitor interagency cooperation to solve the problems of the homeless.

Efforts should be directed to making state and local Comprehensive Housing Assistance Plans (CHAPS) both more reflective of shelter needs and responsive to the coordination of existing resources. Existing intergovernmental vehicles, such as state human service agencies, should be utilized to facilitate communication and enhance the local capacity to address funding gaps and service overlaps.

ACRONYMS

AFDC	Aid to Families with Dependent Children
BMIR	Below-Market Interest Rate
CCNV	Community for Creative Non-Violence
CDC	Community Development Corporation
CHAP	Comprehensive Housing Assistance Plan
EA	Emergency Assistance
FHA	Federal Home Administration
FmHA	Farmers Home Administration
FMR	Fair Market Rent
FY	Fiscal Year
GA	General Assistance
GAO	General Accounting Office
HHS	U.S. Department of Health and Human Services
HUD	U.S. Department of Housing and Urban Development
NBER	National Bureau of Economic Research
RMA	Rand McNally Area
SRO	Single-Room Occupancy
SSI	Supplemental Security Insurance
VA	Veterans Administration

APPENDIX A
ESTIMATES OF THE HOMELESS POPULATION BY CITY

ESTIMATE OF THE NUMBER OF HOMELESS

Cities	Local (1) Estimates	Local Counts	Central City Pop. (4) (000's)	Metropolitan Pop. (4) (000's)	Homeless rate
Large Metropolitan Areas:					
Elizabeth, NJ	300 (3)		107	17677	0.0028
Yonkers, NY	1300 (2)		191	17677	0.0068
New York, NY	29000		7165	17677	0.0040
Newark, NJ	3000 (2)		316	17677	0.0096
Los Angeles, CA	32550		3097	12373	0.0105
Santa Monica, CA	900 (2)		88	12373	0.0102
Chicago, IL	19850	2344	2992	8035	0.0066
Philadelphia, PA	3600		1646	5755	0.0022
San Jose, CA	1000 (3)		686	5685	0.0015
San Francisco, CA	8250		712	5685	0.0116
Detroit, MI	7500		1088	4577	0.0069
Monroe, MI	23		63	4577	0.0004
Boston, MA	3200	2113	571	4027	0.0056
Brockton MA	250 (3)		96	3695	0.0026
Houston, TX	6350		1706	3566	0.0037
Washington D.C.	4700	6454	623	3630	0.0075
Dallas-Fort Worth, T	7000 (2)		1388	3348	0.0050
Miami, FL	5950		372	2799	0.0160
Cleveland, OH	410		547	2788	0.0007
St. Louis, MO	500 (2)		429	2398	0.0012
Atlanta, GA	2000 (2)		426	2380	0.0047
Pittsburgh, PA	888	857	403	2372	0.0022
Annapolis, MD	75		32	2245	0.0023
Baltimore, MD	690		763	2245	0.0009
Minneapolis/St. Paul	1010		624	2230	0.0016
Seattle, WA	3175		488	2208	0.0065
San Diego, CA	3000 (2)		960	2064	0.0031
Tampa, FL	625		275	1611	0.0023
Denver, CO	2500 (2)		504	1791	0.0050
Phoenix, AZ	1075	2677	853	1715	0.0013
Cincinnati, OH	875		370	1674	0.0024
Milwaukee, WI	1000 (2)		621	1568	0.0016
Kansas City, MO	370		443	1477	0.0008
Portland, OR	1550		366	1341	0.0042
New Orleans, LA	1600 (2)		559	1319	0.0029
Norfolk, VA	300 (3)		280	1261	0.0011
Buffalo, NY	500 (3)		339	1205	0.0015
Providence, RI	250 (2)		156	1095	0.0016
Charlotte, NC	275		331	1031	0.0008
Hartford, CT	1200		136	1030	0.0088
Salt Lake City, UT	538		165	1025	0.0033
Totals	159129		32975	147239664 (5)	0.0048
Medium Metropolitan Areas:					
Rochester, NY	135		243	989	0.0006
Louisville, KY	575		290	963	0.0020
Dayton, OH	295		181	930	0.0016
Birmingham, AL	575		280	895	0.0021
Orlando, FL	400 (3)		137	824	0.0029
Richmond, VA	1175		219	796	0.0054
Jacksonville, FL	300 (3)		578	795	0.0005
Hazleton, PA	13		26	727	0.0005
Scranton, PA	70		84	727	0.0008
Tulsa, OK	43		374	726	0.0001
Syracuse, NY	375		164	650	0.0023
Grand Rapids, MI	350		183	626	0.0019
Raleigh, NC	213		169	609	0.0013
Durham, NC	45		102	609	0.0004
Tucson, AZ	1000 (2)		365	595	0.0027
Fresno, CA	600 (3)		267	565	0.0022
Baton Rouge, LA	175		369	538	0.0005
Las Vegas, NV	1100		183	536	0.0060
Springfield, MA	780 (3)		150	516	0.0052
Little Rock, AR	510		170	493	0.0030
Charleston, SC	83		69	473	0.0012
Albuquerque, NM	1000 (2)		351	449	0.0028
Worcester, MA	1700		160	405	0.0106
Davenport, IA	360		102	381	0.0035
Colorado Springs, CO	98		278	349	0.0004
Fort Wayne, IN	725		165	348	0.0044
Lompoc, CA	33		29	323	0.0012
Charleston, WA	300 (2)		63	267	0.0048
Binghamton, NY	53		55	264	0.0010

ESTIMATE OF THE NUMBER OF HOMELESS

City	Local (1) Estimates	Local Counts	Central City Pop. (4) (000's)	Metropolitan Pop. (4) (000's)	Homeless rate

Totals	13083		5806	59226211 (5)	0.0023
Small Metropolitan Areas:					
Reno, NV	313		106	212	0.0030
Lincoln, NE	133		180	203	0.0007
Fall River, MA	33		92	157	0.0004
Tyler, TX	350 (3)		73	145	0.0048
Jackson, MI	48		209	145	0.0002
Monroe, LA	65		56	143	0.0012
Athens, GA	43		43	137	0.0010
Pueblo, CO	48		100	125	0.0005
Burlington, VT	100 (2)		37	121	0.0027
Sioux City, IA	55		82	118	0.0007
Danville, VA	65		45	111	0.0014
Columbia, MO	65		63	106	0.0010

Totals	1318		1086	25483788 (5)	0.0012
Non Metropolitan Areas:					
Lewiston, ME	28		39	85	0.0007
Pittsfield, MA	50 (3)		50	82	0.0010

Totals	78		89	3775376 (5)	0.0009

Total:	173608		39956000		
Homeless rate:					0.004344

Sources:

1. All estimates from the Department of Housing and Urban Development, 1984, unless otherwise noted.
2. Estimates obtained from Tucker, 1987.
3. Estimates from published data.
4. U.S. Bureau of the Census, Department of Commerce, 1986. "State and Metropolitan Data Book." Washington, D.C. Data are for 1984.
5. U.S. Bureau of the Census, Department of Commerce, 1987. "Statistical Abstracts of the United States." Washington, D.C. 1985 percentages were applied to the total U.S. population in 1984.

Notes:

1. Homeless rate = local estimate divided by total central city population.

APPENDIX B
CHARACTERISTICS OF THE HOMELESS: RESULTS OF LOCAL STUDIES

CHARACTERISTICS OF THE HOMELESS POPULATION

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City/Year of Study	Population Covered	N	Sex ¹		Families	Age ²				Median Age	Race Blacks Over-Represented	Education HS Under-Represented	Work Worked For Pay Last Mo	Veterans	Length of Time Homeless		Mental Health Problems	Substance Abuse Problems	
			Male	Female		<18	19-39	40-59	60+						One Year or Less	More Than One Year			
I. Enumerations																			
D.C. (1984)	Street, shelter	2,562	69 ^(a)	13 ^(a)	17% of population						Y								
Nashville (1984)	Street, shelter (Skid Row only)	821	84	16		5	N/A	N/A	24		Y								
Boston (1983)	Street, shelter	2,767	76 ^(a)	20 ^(a)	4% of population														
II. Interviews With Homeless																			
Baltimore (1985)	Shelters, soup lines, missions	236	60	40		N/A	72	N/A	N/A								33-37	22-24	
Chicago (1986)	Street, shelter	722	75	25		11 ^a	39	30	19	39 yrs	Y	N	34			61	39	15-22	13
Boston (1985)	Street, shelter, mental health ctr	328	81	19		15 ^b	33	38	13	35 yrs	Y	Y	11					38-45	30
Seattle (1984)	Shelter	655	N/A	N/A	36% of Households						Y			22					
Multnomah Co., OR (1984)	Streets, shelters, soup lines, SROs, camps	131	85	15		3	58	32	7	36 yrs			8	66			19	40	
L.A. (UCLA, 1985)	Missions, soup lines, parking lot. (Primarily from Skid Row)	238	77	23		0 ^c	64	30	6	35 yrs	Y	Y		37		64	36		
NYC (MDCR)	Street, shelter, welfare hotel	516	N/A	N/A		0	N/A	N/A	10		Y	Y							
Austin (1985)	Street only	500	93	7							Y	Y		44		53	47		
Ohio (1984)	Streets, shelters, hotels	979	81	19		0	63	30	6	34 yrs	Y	Y	25	32		77	23	30	
Utah (1986)	Not documented	243	78 ^(a)	7 ^(a)	15%					35 yrs	Y					70	30		

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City/Year of Study	Population Covered	N	Sex		Families	Age				Race	Education HS	Work	Veterans	Length of Time Homeless		Mental Health Problems	Substance Abuse Problems
			M	F		<18	18-29	30-39	40+					Median Age	Blacks Over-Represented		
III. Provider Estimates																	
Maryland (1985)		64	36		20% of population	22	N/A	N/A	8		Y						
New York State (1984)		36 ^(a)	8 ^(a)		53% of population	7 ^d	35	31	6		Y					32 ^(a)	33 ^(a)
Boston (1983) (Census)		78 ^(a)	18 ^(a)		11%	2 ^a	51	32	6							31 ^(a)	42 ^(a)
HUD National Shelter Survey (1984)		66 ^(a)	13 ^(a)		21%						Y					22	38
U.S. Conference of Mayors (1984)		36 ^(a)	15 ^(a)		28%							19				29	29
U.S. Conference of Mayors (1987)		49 ^(a)	14 ^(a)		33%							22				26	35

Notes

¹ Breakdowns include individuals and family members in most cases. Breakdowns which apply to homeless singles only are marked (s).

² Age breakdowns are approximate due to reporting differences among the studies. Where different, categories used in the local studies are noted.

a <15, 25-39, 40-54, 55+
b <18, 25-34, 35-44, 55+
c <17

d <18, 18-30, 31-60, 60+
e 17-19, 20-44, 45-60, 65+

APPENDIX C

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