

NYACK COLLEGE ALLIANCE UNIVERSITY



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POLICY ANALYSIS BRIEF

HOMELESSNESS AND HOUSING

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## Goal Statement

Homelessness is not a new concern in America, however the economic outcome from the Covid-19 pandemic have brought an increased awareness of this crisis due to the increase in homelessness. The increased awareness of the severity of the homelessness crisis is no longer limited to those in proximity due to the internet, television, social media, and other social platforms. However, those in proximity can attest to the realness of their everyday reality and encounters. Data presented by those tasked to review and report information about homelessness typically presents details highlighting the problems surrounding homelessness, but not many present the hopes or possibilities of a solution.

Due to the current state of our country, we can no longer simply acknowledge yet still overlook the homelessness crisis, realizing how much it directly affects our economy and our day-to-day life. Some look at this crisis as simply a federal and state governmental failure, although this may be true, it is also important that we understand the role every one of us have in advocating for and achieving change. The purpose of this briefing is intended to conclude passing the blame on those that might have failed us, but to look at how we are failing each other. The truth is, we all have our views on homelessness that are typically influenced by opinions and less about facts. The more we truly understand homelessness by facing the facts and eliminating our personal opinions and feelings, we will have a better understanding of the homelessness crisis and are better positioned to find and partner with finding a solution.

Knowledge is power! This briefing is intended to increase our knowledge of homelessness and the severity by looking at the past, present and possibilities for the future of ending homelessness. May every reader make use of this power and apply it appropriately to support the change we are all longing to see. Immediate steps are needed to provide appropriate

services and support that enable people to exit homeless shelters more quickly and easily, or to avoid them altogether in the first place. Our contribution to this change will look different for all of us, however we can all play a part in the solution.

### **Scope of the Problem**

The Substance Abuse and Mental Health Administration (SAMHSA) and the Social Security Administration (SSA) defines a homeless individual as; someone with no permanent living arrangement, no fixed place of residence, neither a member of a household nor a resident of an institution, someone who sleeps in doorways, overnight shelters, parks, bus stations and etc., or a person that stays with a succession of friends or relative and has no permanent living arrangement (Social Security, 2005).

There are different categories of those experiencing homelessness such as: an individual or family who lacks a fixed, regular, and adequate nighttime residence, such as those living in emergency shelters, transitional housing or places not meant for habitation or an individual or family who will imminently lose their primary nighttime residence (within 14 days), provided that no subsequent housing has been identified and the individuals/family support networks or resources needed to obtain housing, or unaccompanied youth under 25 years of age, or families with children and youth who qualify under other federal statutes, such as Runaway and Homeless Youth Act, have not had a lease or ownership interest in a housing unit in the last 60 or more days, have had two or more moves in the last 60 days, and who are likely to continue to be unstably housed because of disability or multiple barriers to employment, or an individual or

family who is fleeing or attempting to flee domestic violence, has no other residence and lacks resources and support networks to obtain other permanent housing.

In an article found of the National Library of Medicine website titled “Permanent Supportive Housing: Evaluating the evidence for Improving Health Outcomes Among People Experiencing Chronic Homelessness’ the term “homelessness” when first used in the 1870 was meant to “itinerant tramps traversing the country in search for work”. These individuals were perceived as characterless, this moral crisis threatened the long-held perception of “home-life” verse the lack of a permanent home (National Library of Medicine, 2018). During this period the focus was primarily on the individual facing homelessness. Those facing homelessness were categorized as those who lacked morals and character, facing homelessness due to who they were, without considering the lack of housing or the means to financially sustain housing.

In the early 1820’s less than 7 percent of Americans lived in the cities that many of us call home today. Homelessness first became a national issue in the 1871’s. The growth in industrialization around the 19<sup>th</sup> century caught the attention of many immigrants to areas such as Boston, New York, and Philadelphia (National Library of Medicine, 2018). This clearly increased the need for housing and employment, which did not grow as rapidly as the population did. The American lifestyle originally known for individuals living and surviving on farm life quickly shifted to working individuals working to earning and wage to support living and their day-to-day need.

## **Past Policy**

If we fast forward to the 1980's also known as the "Modern Era of Homelessness". Research teaches us that key influences that changed and increased the appearance of homelessness. Things such as; gentrification of the inner city, deinstitutionalization of the mentally ill, high unemployment rate, the emergence of HIV/AIDS, an inadequate supply of affordable housing options, and deep budget cuts to the U.S. Department of Housing and Urban Development (HUD) and social service agencies in response to what was then the country's worst recession since the Great Depression (National Library of Medicine, 2018). During this time, as challenges increased so did property values and the cost of living, however wages did not increase. This alone is a clear indication that despite how hard a person may work, it is impossible to meet living requirements when wages are not moving in the same direction as expenses. Therefore, a person with mental health, physical health, development delays etc. would still struggle to prevent homelessness or to sustain housing because there was no clear connection to homelessness and a person's characteristics.

As homelessness continued to increase, resources to support the homeless decreased. In the 1980's the recession resulted in steep cuts to the U.S. Department of Housing and Urban Development (HUD), from approximately \$29 billion in 1976 to approximately \$17 billion in 1990, nearly a \$12 billion dollar decrease. If the fund originally provided did not adequately meet the needs to support the homeless population, budget cuts would only make a bad situation worse. There are two major changes in policy that are particularly known to have contributed to the rise in homelessness at that time. "First, cuts in Supplemental Security Income (SSI) in the late 1980s, accompanied by a tightening of the disability eligibility process (Social Security Act of 1980), adversely affected mentally ill persons living in rooming houses. The subsequent loss of personal income contributed to homelessness for many of these individuals). The Social

Security Disability Benefits Reform Act of 1984 was later enacted to pull back on some of the aspects of the 1980 Social Security Act, which impeded the efforts of some individuals experiencing illness and homelessness to pursue benefits. Second, public inebriation was decriminalized in many cities, and those once jailed for public drunkenness now avoided arrest and often entered shelters or remained on the streets (National Library of Medicine, 2018)”.

At this time, around the late 19<sup>th</sup> century, the local and state authorities were responsible for those that were considered homeless. Very much like today these cities were overwhelmed with overcrowding, poor hygiene and sanitation issues which lead to an increase outbreak of major infectious diseases. “To address the growing problem of urban slums, in 1892 Congress allocated \$20,000 to the Department of Labor (DOL) to investigate urban slums in cities with at least 200,000 residents (National Library of Medicine, 2018)”. President Theodore Roosevelt, the president during this time created a formal housing commission to support the continuation of these investigations, however this did not last long due to the stock market crash in 1929.

The Great Depression of the 1930s also played a major role in the significant increase of homelessness. There was a need to focus on the issues pertaining to poverty and to increase the quality and affordable housing. In response to this awareness there were several federal policies and parts of legislation that were passed and implemented to improve the overall quantity and affordability of housing. Two examples were, the Emergency Relief and Construction Act of 1932 authorized the Reconstruction Finance Corporation to lend public funds to corporations to build housing for low-income families Another relevant federal legislative act from this era included the National Industrial Recovery Act of 1933, which allowed the Public Works Administration (a government-sponsored work program) to use federal funds for slum clearance,

the construction of low-cost housing, and subsistence homesteads; close to 40,000 housing units were produced that year(National Library of Medicine, 2018).

## **Current Policy**

Years of efforts to end homelessness have been made. History records homelessness from an original viewpoint of blaming the homeless individual, to openly realizing that the issue of homelessness and the solution cannot be the responsibly of those experiencing homelessness. History has highlighted issues in the economy and the direct effect it has on homelessness, however decades later there a still thousands of individuals and families effected by issues in the economy and homelessness, many are vulnerable to experiencing homelessness.

On December 19, 2022, the Biden-Harris Administration announced a plan to prevent and end homelessness called “All in”. All in was said to be the most comprehensive Federal Please to systemically prevent homelessness and address racial and ethnic disparities in homelessness. The plan presents a striving goal to reduce homelessness by 25% by 2025. The Biden-Harris administration informs us that his plan is built of the success of previous plans but will do more than any other previous effort. “My plan offers a roadmap for not only getting people into housing but also ensuring that they have access to the support, services, and income that allow them to thrive, it is a plan that is grounded in the best evidence and aims to improve equity and strengthen collaboration at all levels.” said President Biden.

“All In” is a multi-year, interagency roadmap for a future when no one experiences the tragedy and indignity of homelessness—and everyone has a safe, stable, accessible, and affordable home. This plan was developed by United States Interagency Council on

Homelessness (USICH) with the collective thinking of 19 federal agencies that make up the USICH Council and is expected to be updated annually to reflect the latest evidence, progress, and input.

In preparation of the development of “All In” the USICH started a comprehensive and inclusive input process. This that included over 1,500 online comments and 81 listening sessions that gathered feedback from thousands of providers, elected officials, advocates, and others, including more than 500 who have individuals and families that have experienced homelessness. The process included people from nearly 650 communities, tribes, and territories. “The plan was built around six pillars: three foundations—equity, data and evidence, and collaboration and three solutions; housing and supports, crisis response, and prevention. Within each pillar are strategies and actions that lay the groundwork for a future when no one experiences homelessness—not even for one night” (USICH, retrieved April 2023).

There appears to be a significant shift to achieving the solution to homelessness today, since the homelessness solution is now perceived to be the creation or availability of affordable housing and an increase income, while during the early 20th century, jobs rather than housing were viewed as the solution to the difficulties of homelessness in this country (National Library of Medicine, 2018), also remember the 1800s when individual characteristics were said to because of homelessness.

“Housing should be treated as a human right,” said USICH Executive Director Jeff Olivet. “Many Americans ask, ‘Is it possible to end homelessness?’ The answer is, yes, the United States can end homelessness by fixing systems—not by blaming the people being failed by them. With *All In*, the Biden-Harris administration outlined a set of strategies and actions for

doing just that. Now we must scale what works and develop new and creative solutions to build a future where no one experiences the tragedy and indignity of homelessness—and everyone has a safe, stable, accessible, and affordable home. The evidence shows that stable housing is essential to health and well-being. Like many health conditions, homelessness is preventable, and I am proud to be part of an administration that acknowledges the power of prevention,” said HHS Secretary Xavier Becerra, who serves as vice chair of USICH (USICH, retrieved April 2023).

### **Proposed Solution**

On the same day the Biden- Harris Administration announced the “All In” homelessness prevention plan the United States Department of Housing and Urban Development (HUD) released the HUD Release 2022 Annual Homeless Assessment Report. The reports began reported “Biden-Harris Administration investments and actions prevented a spike in homelessness overall, and led to decreases in homelessness among Veterans, families, and youth Homelessness rose for individuals, people with disabilities who experience long-term homelessness, and people in unsheltered settings” (HUD, retrieved April 2023). This report found 582,462 people were currently experiencing homelessness on a single night in January 2022. COVID-19. This report suggested that economic impacts could have led to significant increases in homelessness, however investments, partnerships and government agency outreach resulted in only a .3% increase in the number of people experiencing homelessness from 2020 to 2022. It is stated that Biden-Harris Administration intends to “not only stop but reverse the post-2016 trend of rising homelessness and reduce it 25% by 2025”. Research highlighted facts such

as homelessness among people in shelters declined by 1.6%, while homelessness among people in unsheltered settings increased by 3.4%.

Three strategies were implemented during the COVID\_19 pandemic and have been highlight as strong contributions to preventing a spike in homelessness: a robust federal response that prevented evictions through Emergency Rental Assistance distributed to more than three million households, expanded resources for vulnerable families through the Child Tax Credit and provided other financial transfers through stimulus. Moving forward 10 strategies to reduce Homelessness with the American rescue plan have been identified. The United States Interagency Council on Homelessness strategies are: Set Community-Specific Goals, Cultivate Political Will and Partnerships, Ensure Racial Equity in All Decision-Making, Reduce Administrative and Regulatory Barriers, Reduce Waiting Periods for Housing Placements, Guarantee Paths to Housing From Unsheltered Homelessness, Recruit, Support, and Retain Landlords, Leverage Support Services, Support Innovation in Development and Coordinate Federal, State, and Local Housing Resources.

As research has shown, many have attempted to end homelessness and although strategies may have helped nothing has worked. What has worked due to these efforts of many, we are all more aware of the causes of homelessness. One noticeable contributor from the beginning is the direct disconnect between the cost of living and wages. As we acknowledge this, we must also recognize that this change cannot happen without all of us. There is power in numbers. Accepting that homelessness is not a “them” problem, but an “us” problem can increase the time and the likeliness for change.

## **Conclusion**

Homelessness has had and will continue to have a ripple effect throughout our society. It impacts the availability of healthcare resources, crime and safety, the workforce, mental health, substance abuse, wellness, and the use of tax dollars. Homelessness has affected the past, impacted the present and will continue to negatively affect the future of our world. It benefits all of us to break the cycle of homelessness, one person, one family at a time.

Support for the homeless will look different for everyone. Some can contribute financially, some will volunteer, while others will join advocacy groups and events. I look forward to a world where the streets are filled with flowers instead of people. I will never forget that day I saw my childhood best friend eating out of the garbage. In that moment I realized that we don't choose homelessness, it chooses us and after today we can all choose each other and a better world for all of us.

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