UNDERSTANDING THE HUMAN EXPERIENCE OF HOMELESSNESS

How We Got Here and What Can Be Done

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HOMELESSNESS: AN OVERVIEW

Homelessness is a complex issue that is a result of many inequities in the United States. Homelessness in the United States has increased over the years. Many communities are struggling to find affordable homes, especially as the United States is growing to be more expensive. Research has shown that homelessness, specifically the housing crisis, in Boston, Massachusetts has especially increased n the past few years. Homelessness is grouped into three different categories: episodic homelessness, chronic homelessness, and transitional homelessness.

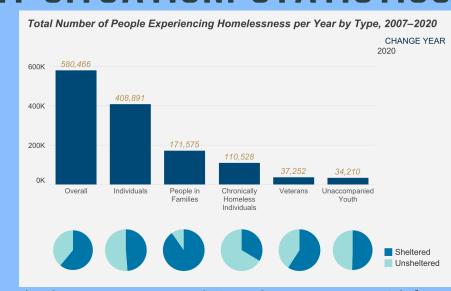
Episodic homelessness is when a person and/or family has experienced three instances of homelessness within a year. Episodic homelessness turns into chronic homelessness after the fourth experience with homelessness.

Chronic homelessness is defined as homelessness that lasts for more than a year. This usually encompasses older individuals who have been unemployed for a while. This type of homelessness is the most well known.

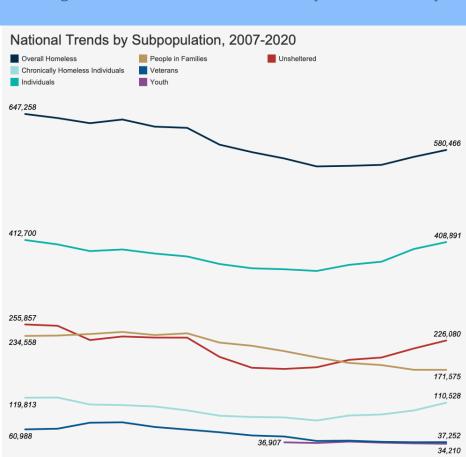
Transitional homelessness is defined as people who are homeless for only a short period of time. They may have witnessed a catastrophic event causing them to rely on the system before moving to more stable housing.

EXAMINING CURRENT SITUATION: STATISTICS

In order to understand the complexities of homelessness, it's important to understand who is homeless. In January of 2020, 580,466 people experienced homelessness in the United States. 17,975 people in Massachusetts experienced homelessness in 2020. COVID is expected to have exacerbated these numbers; however, no more recent data has been collected yet. In the United States, 19% of the homeless population is considered **chronically homeless**.



While homelessness affects a wide range of people, there are some populations that are more at risk for being homeless. **Systemic injustices** play a role in homelessness. Nationally 18 out of every 10,000 people are homeless. For Black people, the rate of homelessness is almost 3 times that national average, and for Native Hawaiians and other Pacific Islanders it is roughly 6 times the national average. Gender also plays a role in rates of homelessness. For males, 22 out of every 10,000 people experience homelessness, whereas for females it is 13 people out of every 10,000. When it comes to queer populations, 40% of homeless youth identified as being part of the LGBTQ+ community. Overall, 50% of youth without families are unsheltered. A critical population that is often focused on when creating homeless policies is youth and families. In Massachusetts, families with children that don't have housing have the right to immediate housing with some limitations, which is why families are only 10% of unsheltered people.



2009

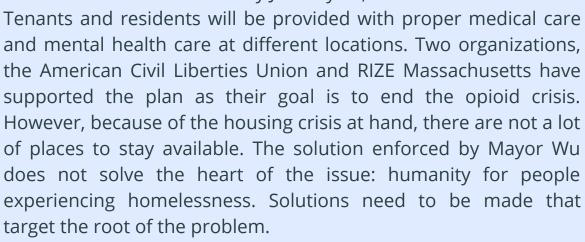
2007

Veterans are a group of people who often experience higher rates homelessness because it is hard to reintegrate into society after living in a war zone. In the early 2000s, there was a strong effort to decrease experiencing homelessness because they have served our country, which showed that there are strategies that can decrease the rates of people experiencing homelessness. positive side, since 2007 veterans experiencing homelessness has decreased by 39%.

Actively not having housing is only the tip of the iceberg. Many people experience **housing insecurity**, which can be similar to the effects caused by homelessness and lead to homelessness itself.

LOCAL SPOTLIGHT: MASS AND CASS

Mass and Cass, a tent city located around the intersection of Melnea Cass Boulevard and Massachusetts Ave in Boston, Massachusetts, is known by many as the epicenter of the opioid crisis in the region. People who are homeless seek shelter in that area, increasing after the closing of a treatment facility located near Long Island. There have been several attempts to clear out the violence and opioid addictions that are believed to be associated with the area. Former mayor Kim Janey began the process to move people out of tents and into shelters and other forms of housing, saying, "We cannot let our most vulnerable residents continue to suffer in these encampments." Mayor Michelle Wu has made it her goal to have tenants living in Mass and Cass clear out the area by January 12, 2022.







A SCIENTIFIC PERSPECTIVE

Homelessness is a public health issue. Lack of shelter, food, and safety can have serious implications on one's physical and mental health. On average people experiencing homelessness die 12 years sooner than the general population in the United States. Being without shelter is dangerous and negatively affects one's health. Lack of access to personal care, nutrition, and hygiene also contributes to illnesses and long term conditions.

Health Conditions Among the Homeless Population in Comparison to the General US Population

	HOMELESS HOUSED	
	✓ VERSUS → →	
18%	Diabetes	9%
50%	Hypertension	29%
35%	Heart Attack	17%
20%	HIV	1%
36%	Hepatitis C	1%
49%	Depression	8%
58%	Substance Use Disorders	16%

Source: Health Center Patient Survey (HCPS) 2009

People who experience homelessness have significantly higher rates of heart attack, hypertension, HIV and other diseases. Violence, sexual abuse, and substance abuse are more prevalent as well. Lack of resources, care and mental health issues such psychotic disorders, affective depression, disorders and dementia are high also people experiencing homelessness.

LOCAL ORGANIZATIONS AND HOW TO GET



INVOLVED



The BASE: Is a nonprofit working with young people with the goal to change the narrative away from a deficit model.

"Inspiring a national movement of citizens who believe in the incredible wealth of talent and ability of urban young people. The result will be the development and scaling of educational opportunities and career pathways that harness the talents of urban young people, creating more equitable opportunity to succeed and thrive in the modern economy."

Website: https://thebase.org/donate/

More Than Words: is a nonprofit that empowers young adults.

"We believe that when system-involved youth are empowered with authentic and increasing responsibilities in a business setting, and are given high expectations and a culture of support, they can and will address personal barriers to success, create concrete action plans, and become contributing members of society who live, love and own their futures."

Store Location: 242 East Berkeley Street, Boston,

MA 02118

Website: https://mtwyouth.org/what-we-do/

WHAT CONCERNS DO STAKEHOLDERS HAVE ABOUT PEOPLE EXPERIENCING

HOMELESSNESS?

HOUSING

One major step in ending homelessness is to prioritize building affordable, safe, desirable housing. Homelessness takes a toll on many aspects of a person's life, such as mental healthcare, physical healthcare, education, and access to jobs. However, when a person is housed, they have better access to all these services. Housed people tend to get better educations, get better healthcare and, when the housing is affordable, they are at a much lower risk of housing insecurity or homelessness.

PUBLIC HEALTH

The classification of homelessness as a public health issue has numerous benefits stemmed in science. It seeks to answer four questions that aid in addressing the issue:

- 1. What is the problem? How many people are homeless, who are they, where are they, when did it happen, how did it happen and are these numbers increasing or decreasing?
- 2. What are the causes of homelessness?
- 3. What works to prevent homelessness?
- 4. How do you implement and scale up those things that work?

SYSTEMIC CHANGE

Homelessness is caused by many systemic injustices; not by the fault of the person(s) who are experiencing homelessness. There is no one story of homelessness and it's the intersection of many systems failing. These include systemic racism, homophobia, income inequality, non-equitable access to education, climate change, lack of health care, sexism, foster care system, and the criminal justice system. These same systemic injustices apply to housing insecurity as well. Blame is often placed incorrectly; we need a two-fold answer. First, what preventive measures can we put in place so people don't get forgotten by the system? Second, once someone is experiencing homelessness, how can we value their humanity and provide them basic human rights?

THESE CLUSTERS OF CONCERNS WE GATHERED INFORMED THE TYPES OF ACTIONS WE PROPOSED BELOW AND THEIR POTENTIAL TO ADDRESS THE SYSTEMIC ISSUES THAT LEAD TO HOMELESSNESS AND HOW THEY CAN BE REMEDIED AND ACTED UPON.

PRIORITIZE BUILDING AFFORDABLE HOUSING AND HOUSING PEOPLE AS A WAY TO COMBAT HOMELESSNESS

The reasons for this are....

REASON ONE: HOUSED PEOPLE TEND TO HAVE BETTER EDUCATIONS

When families can barely afford to pay their rent, they count and save every single penny and often do not have any left over to pay for educational enrichment programs, exacerbating educational and opportunity gaps between children from low-income and high-income households. This is especially important given the fact that school districts in high-income neighborhoods tend to give better quality educations than those in low-income neighborhoods. Additionally, children with unstable housing situations are more likely to develop severe mental health problems, repeat grades, or drop out of school. Oftentimes, this is because their families are moving from school district to school district, and they do not have the opportunity to get comfortable in any one schooling situation.

Drawbacks: Some people look at this data and say that instead of investing money to build affordable housing in prime school districts, cities and non-profit organizations should instead invest resources in bettering school districts in low-income neighborhoods.

REASON TWO: HOUSED PEOPLE TEND TO HAVE BETTER HEALTHCARE

Over half of families that receive federal rental subsidies have a disabled parent. Unstable housing situations, especially when they result in families constantly moving around, make it difficult to manage care for people with disabilities or chronic health conditions. Hospitals in major cities such as New York, Philadelphia, Washington DC, and St. Paul have created and participated in programs to help make affordable housing more accessible to people with disabilities, build affordable housing near hospitals and emergency rooms, or to build hospitals or emergency rooms near affordable housing. People who are experiencing homelessness or housing insecurity will often push off visits to medical professionals because they worry about the costs of such visits. However, when people are housed and feel more comfortable in their financial situation, they are more likely to go to a doctor instead of waiting for a health issue to become unbearable.

Drawbacks: It is yet to see if these hospitals and doctor offices near affordable housing units make the neighborhoods more expensive to live in. Additionally, housing people will help to stop people from developing serious health issues in the future but does not focus on healing people who are currently suffering from severe health issues due to homelessness or unstable living situations.

REASON THREE: WHEN HOUSING IS MORE READILY AVAILABLE, FEWER PEOPLE ARE AT RISK OF BECOMING HOMELESS

Housing is extremely expensive as rents have skyrocketed in recent years while wages have remained stagnant. The 2018 Out of Reach Report published by the National Low Income Housing Coalition found that, without paying more than 30% of their annual income on rent, a person would need to make \$22.10 per hour to afford a "modest two-bedroom apartment." The federal minimum wage is only \$7.25 per hour. If housing remains inaccessible, more and more people will find themselves experiencing homelessness or at risk of experiencing homelessness. In fact, for every 100 low-income households, who spend more than 30% of their annual income on rent, there are only 33 available affordable units. By building more affordable housing, spurred by state, local, and federal governments working with non-profits, more of those families would find themselves in housing situations that they could afford and in which they could feel safe and secure.

Drawbacks: Building more affordable housing does not get to the root cause of this issue: the national average pay needed to afford rent on a two-bedroom apartment is almost \$15 over the national minimum wage.

CLASSIFYING HOMELESSNESS AS A PUBLIC HEALTH ISSUE

The reasons for this are...



REASON ONE: PUBLIC HEALTH IS BASED ON SCIENCE

Public health policies must be based on evidence, support quality data, and data sharing. The United States Department of Housing and Urban Development, the United States Department of Veterans Affairs, and other federal agencies have worked to help communities have high quality data. However, bad technology has made it difficult to use the data for improvement. Therefore, we must implement simpler federal and local policies with common data quality standards. Homelessness needs to be measured with as current information as possible.

Drawbacks: Some data can be collected but not used properly and risk violating certain privacy standards. Furthermore, the collection of data might become a source of reliance that decreases other efforts

REASON TWO: PUBLIC HEALTH FOCUSES ON PREVENTION

We need to try and prevent people from becoming homeless from the beginning and protect one another from experiencing it. Having the CDC involved is a way to help bring the issue to public light as a public health one and make it part of our national agenda, emphasizing its importance. Creating a task force by the presidential administration would work with HUD and other agencies to improve homelessness, data standards, reporting requirements and infrastructure as part of the Public Health Data Modernization Act, and to integrate homelessness and public health data at the local level. The CDC should also be asked to join the US Interagency Council on Homelessness, which helps new research to inform effective practice, gives evidence-based intervention guidance to communities helps coordinate federal homelessness policy. Making the CDC an integrative role on the Council would allow opportunities on a public health and policy side.

Drawbacks: Focusing on more national efforts could diminish different initiatives led by smaller organizations that work within communities and advocate more closely for people experiencing homelessness.

REASON THREE: PUBLIC HEALTH REQUIRES COLLABORATION

Using a public health approach means bringing in people and as various networks, such leaders from departments at different levels organizations, government, and investment. We also must work with the partnership between public health and housing, which would mean cleaning up squalid tenements, removing lead paint, having adequate sanitation and more. On a policy level, we need to expand rental assistance, have more choice, and keep getting equitable policies that are in line with the demographics and housing needs. Lastly, the system must have accountability. People experiencing homelessness often interact with many different organizations to try and help them. They must eliminate the harms people experiencing homelessness deal with in these processes, especially the unnecessary time cost. Voters must support policies that emphasize collaboration, reduce bureaucracy, and prioritize homelessness.

Drawbacks: Given the current political polarization in the USA, issues pertaining to homelessness could become abused as political ones that stoke divisions among people and promote falsehoods to try and secure power, forgetting the main issues.

UNDERSTANDING HOMELESSNESS IS CAUSED BY SYSTEMIC FAILURES

The reasons for this are....



REASON ONE: ACKNOWLEDGING SYSTEMIC RACISM

The history of systemic racism and current systemic racist practices play a role in inequalities in housing employment, pay, education accessibility and more. In Boston the average assets of a Black family is \$8 compared to a typical white family which has average assets of about \$250,000.

Since racism runs rampant in our society, this will take a compressive approach, including addressing redlining, unequal funding of education, reforming the criminal justice system, and more. Providing increased government funding for reparations for redlining is one approach. Changing how our schools are funded from local property taxes to general tax revenue will make education more equal across our state and society.

Drawbacks: Policymakers tend to disagree on determining how to provide reparations equally. If we change how schools are funded, people might move their children out of public schools creating more "white flight" and increasing the achievement gap.

REASON TWO: EDUCATIONAL EQUITY

Education is one of the most influential factors in childhood development and becoming more and more essential for getting a job. Providing access to equal education is an important systemic change to prevent homelessness. Research shows children without a high school diploma or GED are 4.5 times more likely to become homeless. Also experiencing homelessness makes it 87% more likely for students to drop out of school.

Providing and funding easily accessible GED programs for people who are homeless or housing insecure can create career pathways for people who are already homeless. Having extra support for students who are housing insecure or are borderline dropping out of school can help prevent homelessness in the future. Funding and implementing mentoring and nonprofit programs can help support students. One example of a mentoring program that is helping students stay on track for graduation and giving them community is the BASE in Boston, which provides a safe place for children in the Boston area, mentorship, and teaches everyone to play baseball while also doing courses to apply to college.

Drawbacks: We already ask teachers to do so much and it can be difficult to create partnerships between nonprofits and schools. People have to be willing to participate in these programs, and if someone is already beaten down by the system, they may opt out.

REASON THREE: PROXIMITY

Policy decisions are often made from research that is presented from a deficit perspective, not done by people who are a part of the demographics being researched. When you have proximate leaders, you have people who are part or close to the issue discussed, helping inform and create policy.

Having more practitioners and people who have previously experienced homelessness or who are actively experiencing homelessness will help inform research and policy. Proximate leaders direct the conversation to the right relevant issues and help create human centered policies that are both preventive and responsive policy around homelessness. One way to do this is work with non-profits who work with people who are homeless and inform policy makers with their proximate experience. One non-profit that does this is More Than Words, which works with homeless youth to help them create policies that are accessible.

Drawbacks: No one should be forced to relive trauma in order to create policies. Also, a trauma response could cloud someone's judgment when making decisions that will impact everyone since there is no single experience of homelessness.

Just as the causes of homelessness are many, we will need an intersectional coalition of many organizations and people to develop systemic solutions. This coalition will need to incorporate the private, public and non-profit sectors, as well as proximate leaders with lived experience. These are a few of the many proposed solutions which we hope will inspire others to think creatively and empathetically to develop more.

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