Social Work's Grand Challenge to

End Homelessness

Policy Proposals for the **2020** U.S. Presidential Election

Grand Challenges
for Social Work
End Homelessness

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Ending Homelessness Can Be Done: An Agenda for the 2020 Presidential Campaign and Beyond

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In this fast-paced year leading up to the Presidential Election of 2020, reducing housing insecurity and homelessness is gaining surprising traction. With homelessness rates rising in major cities, it seems this decades-long crisis has no end in sight. We respectfully disagree. The authors of these essays—all nationally known experts on the topic—demonstrate how such an end could be achieved.

As Co-Chairs of the Grand Challenge to End Homelessness (part of a larger social work initiative—**http://grandchallengesforsocialwork.org/**) we believe the time has come to focus our efforts on what works and how to scale it up. All of the authors draw on their deep knowledge of research findings combined with an astute awareness of what is possible. Two authors take a macro-economic perspective (O'Flaherty and Tsai), two essays call attention to the plight of aging Baby Boomers in the homeless population (Culhane et al. and Kushel) and one focuses on the unique circumstances of homeless youth (Morton & Horwitz). Andere's essay brings needed attention to racial inequity and homelessness. The remaining essays by Shinn & Khadduri, Roman & Yentel, Tsemberis and Mangano represent a concise set of recommendations to increase the stock of affordable housing, make housing more available to low-income persons, and tailor programs to the diverse needs of homeless youths, adults and families.

Messaging is important here. It is worth noting that in the 1970s there was actually a surplus of low-income housing in the U.S. (Dolbeare & Crowley, 2002). The Reagan era instigated the tragic human crisis we are in today. As homeless advocates remind us, inspiring stories of individual success in getting housed may not be enough to move Americans toward supporting a true end to homelessness, i.e., public benefit needs to be established. This benefit can come from cost-savings, civic pride, or simply an ethos of helping. While philanthropy from profit-rich corporations such as Google, Amazon, and Microsoft can help lead the way for the private sector, the ultimate responsibility lies with public funding that is sustained over time.

WHAT WILL IT TAKE?

These essays underscore the need for political will—that intangible combination of public pressure and courageous leadership needed to change the status quo.

This is not an easy task, in part due to the obdurate nature of apathy (and outright prejudice), but also because there is now a 'homeless industry' that—however well-intentioned--depends upon billions annually to sustain it. Is that money wisely spent and is it enough?

Here's a brief thought experiment: An adult shelter bed in New York City costs over $100 per day and a homeless family's shelter costs $200 per day. If 2/3 of that $36,500 (or $73,000) were converted to a rental voucher it would cover the annual cost of a one (or two) bedrooom apartment in a low-to-middle income neighborhood and leave funds left over for the support services that some (not all) homeless persons need to transition to stable living. This doesn't even consider the physical and psychological toll of living in a shelter. Why can't we do better?

There is virtual unanimity today that the way to end homelessness is with homes. Evidence-based approaches such as Housing First and Critical Time Intervention are essential ingredients of changing policies. Indeed, we would argue that there are few clearer paths to improving people's lives than those laid out by the research on homelessness. Will our elected leaders step up?

There is no magic bullet—many different actors and actions are needed. We hope this collection of essays will be widely shared in the next year and beyond—we will be using it to reach out to the 2020 Presidential candidates and their staffs to inform but also to urge them to take action. *We know what can be done. We urge our readers to help make it happen.*

BELOW IS A BRIEF OVERVIEW OF THEIR COLLECTIVE RECOMMENDATIONS:

1

Expand investment in affordable housing through existing and new revenue sources

2

Shift funds from transitional emergency programs to lasting solutions such as rental vouchers and permanent supportive housing for those with disabilities

3

Prevent homelessness or ensure its brevity by supporting rapid re-housing and time-limited rental assistance. For the majority of homeless (or near-homeless) families this is all that is needed

4

Ensure that the guiding principles of housing first (low barriers to housing, harm reduction, client-centered services) form the cornerstone of homeless services for adults, families and youths

For more information, see: **www.ourhomes-ourvotes.org/the-candidates**.

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Progress and Poverty: Homelessness in Rich Cities

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Dan O'Flaherty, PhD

Dan O'Flaherty, PhD

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Since the Great Recession, homelessness has been rising in the richest cities—the nation's (and the world's) most productive environments—and falling almost everywhere else. In eight superstar cities in the U.S. (Los Angeles, Boston, Washington D.C., San Francisco, San Jose/ Santa Clara, New York City, Austin, and Seattle) the point-in-time count of homeless people rose by 39% between 2010 and 2018, while the point-in-time count for the rest of the country fell by 26%. These cities accounted for 19% of homeless people in 2010, and 31% in 2018. They are not becoming poorer on average—indeed, they seem to be pulling away from the rest of the country in income.

My goal in this paper is to explain why this seemingly paradoxical trend is occurring, and to ask what can be done about it. I'll try to understand the processes that are driving the phenomenon and how they might be counteracted, rather than taking the processes as given and trying to mitigate their effects. I'm trying to keep the Titanic from hitting icebergs, rather than trying to funnel the passengers and crew quickly and fairly into a fixed number of lifeboats. As the title suggests, Henry George (a 19th Century economist and reformer) is the inspiration for much of the analysis and the policies.

In concentrating on homelessness in rich cities, I'm not implying that we should ignore homelessness elsewhere. Homelessness in rich cities presents different kinds of problems and opportunities from homelessness elsewhere. The major difference is that land in rich cities is much more valuable.

WHY IS HOMELESSNESS RISING IN RICH CITIES?

American income inequality has been growing since the late 1970s in two dimensions: differences among cities in median income have been growing, and within cities differences between households have also been growing. On the one hand, the superstar cities have been getting richer and bigger, while the rest of the country has fallen behind. In 1980, for instance, median income in the Bronx was 11% below median income in Cleveland; in 2017 the Bronx was 31% higher. The population of Staten Island was 39% less than the population of Cleveland in 1980; in 2010 it was 20% greater. In the rest of the country, some cities are gaining population (Las Vegas and Atlanta, for instance) and some are losing population (Detroit and St. Louis, for instance), but few are gaining income at a rate approaching that of the superstar cities.

Inequality within cities is also growing. As Autor (2019) shows, college-educated workers in the biggest and densest cities make a lot more money than college-educated workers in smaller cities, and this difference has been growing; but the size and density of a city makes little difference now for non-college-educated workers. Non-college educated workers in big and rich cities used to make more than their peers in other cities.

What's happening? In rough terms, highly educated workers are becoming concentrated in a few cities, where their interactions are creating innovation hubs. They are making each other astonishingly productive. Meanwhile middle-skill jobs have largely disappeared in these cities, either because they no longer exist (file clerks, for instance) or because they no longer need to be near the highly skilled workers they collaborate with (banks' back office operations, for instance). The jobs that are left for non-college-educated workers in these cities generally pay little more than they would in less prosperous places.

What does this mean for poor people in cities? There are two main housing market channels by which an increasing presence of rich people could make poor people worse off. One channel is through the land market. The increasing numbers of college-educated workers in superstar cities have to work and live somewhere, and that requires bidding land away from other purposes. In many cases, that purpose has been housing for poor people. Many of the expanding knowledge-intensive industries that are growing in superstar cities locate in the central portions of these cities, and their employees often work long hours and live near their jobs (Edlund, Machado & Sviatschi, 2015), and during the late 20th century many of the neighborhoods close to the centers of cities were poor. The obvious land for the expanding industries and their workers to use was often that which poor people occupied.

Of course, by itself, this change of land use would present little or no problem to the people involved. In dynamic cities, land uses change all the time: longshoremen left Chelsea and Hell's Kitchen in New York City with minimal unhappiness in the 1960s, for instance, when shipping moved to New Jersey. Land use changes present problems only when no good substitutes are available or open up. That gets us to the second channel, the effect of inequality on filtering.

Filtering is the technical name for the process by which poor people get their houses and their cars most of the time—they inherit them from richer people as the houses and cars get older and less attractive. Rosenthal (2014) documents this process empirically. Filtering is good: if houses lasted only a couple of years and poor people had to rely on newly produced housing (like newly produced food), being well housed would be extremely expensive and probably many more people would be homeless. When filtering is working, the market doesn't have to build new housing for people with modest incomes, and we should be happy about that.

Between 2010 and 2016, the PIT count in New York City and Los Angeles City/County rose 49%; the PIT count in the other superstar cities rose 16% (O'Flaherty, 2019).

In a housing market with filtering, the demand for one quality of housing affects the supply—and hence the price—of housing of all lower qualities. Prices at these lower qualities have to be high enough to induce owners of higher quality housing to let it deteriorate enough to reach the lower quality. In (1995, 1996) I showed that reducing the relative size of the middle class would raise the prices that poor people pay for housing and increase homelessness. The intuition is that if middle class households are few, the number of houses that become available to poor households through downgrading will be small, and so replacing the houses that poor households lose to abandonment, general aging, fire, and other causes will be hard. Poor households will have to pay a lot to entice enough middle-class households to let their houses deteriorate and become lower quality, simply because middle class households are relatively few. And if poor households lose housing because rich people outbid them for the land underneath it, poor households' problems would be more severe.

In (1995, 1996) I argued that this sort of scenario was the most plausible explanation for rising homelessness in cities like New York in the 1980s and early 1990s. Since then the middle class in these cities has continued to shrink and homelessness has continued to rise, so I don't have a lot of reason to jettison this argument now.

To be sure, some of the policies that governments in these superstar cities have engaged in have probably done more to raise homelessness than to lower it (and some have done the opposite). Between 2010 and 2016, the PIT count in New York City and Los Angeles City/County rose 49%; the PIT count in the other superstar cities rose 16% (O'Flaherty, 2019). In this paper I am concentrating on icebergs, not lifeboats.

WHAT TO DO?

There are many possible policy responses to growing inequality and homelessness in superstar cities. Most of them will affect many people at almost no risk of becoming homeless. That is the nature of systemic responses: radar made passage across the Atlantic safe for millions of people whose ships would never have been hit by icebergs, and vaccination "prevents" smallpox for billions of people who would never have caught it. When looking at possible systemic responses, we have to think about benefits and costs for everyone affected, not just those at risk of homelessness.

> **POLICY RECOMMENDATION 1: Land value taxes.**

Water charges, sewer charges, and property taxes should be replaced by land value taxes—or cities should at least move partially in that direction. In general, as George (1879/2001) and other economists who have studied the issue since have shown, land taxes have two great strengths: fairness, because a large portion of the rising productivity of superstar cities has accrued to landowners, who in general have not lifted a finger to cause this happy outcome; and efficiency, because the supply of land at any location is effectively fixed and the tax cannot diminish the amount of land used, or distort its use. A parcel of land is valuable because of what other people in the city do, and that value is what a land tax taxes.

For homelessness, land taxes are interesting because they could reduce substantially the operating costs of apartments that low-income people rent. Land taxes on a parcel of land are the same no matter whether the parcel holds occupied apartments, vacant apartments, a parking lot, or a meat-processing plant. By contrast, the amount a parcel pays for water and sewer charges and for property taxes depends on the use to which the owner puts it, and so those costs are rightly considered part of the operating costs of low-income housing.

Water and sewer charges and property taxes consume a large portion of the rent that poor tenants pay in superstar cities. In New York in 2019, for instance, the water that a family of four uses in a month would cost $150-$200 (this includes the sewer charge), and property taxes amount to $250-$300. The fair-market-rent for a two-bedroom apartment is $1,831 in 2019 and so these costs amount to around a fifth to a quarter of rents. Shifting these costs to land would probably reduce rents noticeably and increase the quantity of housing too.

The situation is generally the same in the other superstar cities. The main difference is that water and sewer charges are higher in the West and property taxes lower. For California, a large part of the water charges represents real scarcity of water, and so there are important efficiency arguments to retain them. But Seattle, like the Northeast, is water-abundant, and the rates there mainly reflect large infrastructure investments in water and wastewater treatment plants and pipes; these should be paid for by land taxes, not water or sewer charges. These investments make every piece of land that they can serve more valuable, whether it is used at the moment for a tennis court or an apartment building. As Bill Vickrey (my former colleague and co-recipient of the 1996 Nobel Prize in Economic Science) often pointed out, when you buy a car you pay for the headlights even if you promise never to drive at night, and you don't charge yourself a fee every time you turn them on to "recoup the cost."

Land taxes should also replace many of the other taxes and fees that poor people pay, like sales taxes and the exorbitant racist traffic penalties that Ferguson, Missouri made famous. This would put money directly in the pockets of people at risk of homelessness, as opposed to relying on market adjustments. (Where is the money going into these pockets coming from? Mainly from people who own land, very few of whom are at risk of homelessness. But it also comes from eliminating the inefficiencies that non-land taxation causes.)

Land taxes would probably reduce homelessness notably. And the net cost to the rest of society would be less than nothing.

POLICY RECOMMENDATION 2: Regulation.

Loosening zoning regulations and other regulatory constraints on housing construction and housing use is a popular idea with almost everyone except the people living near sites where new housing would be built. It has considerable merit because moving people from locations where they are less productive to superstar cities is almost certain to enhance world and national output, and because filtering implies that no matter what quality of housing is built, rent reductions of some size eventually are likely for poor people.

In the next few years, moreover, a good deal of land is likely to become buildable for housing, even in the densest of cities. This is because demand for land for brick-and-mortar retail and for parking will probably plummet (even without fully autonomous cars, simple navigation systems can push cars much closer together, and ride-sharing and ride-hailing apps can reduce the proportion of time that cars stay parked). There is an opportunity to build more housing without greatly lengthening commutes.

The small middle class in superstar cities makes filtering a slow process, and so the gains to poor people from new housing development are not going to be immediate or immense.

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Although simple housing deregulation provides many benefits for the economy in the aggregate, its benefits for people at risk of homelessness have sometimes been exaggerated. Almost all the new housing that deregulation would spur is likely to be for wealthier people. Migrants to the superstar cities are likely to be well-educated, because for people without a college education, the wages the superstar cities offer are not much better than wages in the rest of the country (so new housing in superstar cities won't allow non-college-educated people in the rest of the country to migrate to greater opportunity and will probably exacerbate inequality between cities). As I have already observed, the small middle class in superstar cities makes filtering a slow process, and so the gains to poor people from new housing development are not going to be immediate or immense.

Deregulation that allows greater flexibility in the use of existing housing, however, is more promising. Allowing "granny flats", greater sharing of housing, and use of accessory buildings reduces demand for housing space and housing units, and makes filtering easier. It should help people at risk of homelessness. Reducing requirements for off-street parking, both for houses and businesses, should also help.

Even with the development of new housing, land taxation can assure a more efficient and widespread dissemination of the benefits of less restrictive zoning. As development works now, re-zonings create windfalls for landowners; a great deal of the benefits accrue to the people who own the land on which more intensive development is allowed. A robust land tax

would recapture these benefits and allow them to be spread more widely, either by reducing other taxes, especially regressive ones, or by financing other activities.

Of course, some may argue that inclusionary zoning (IZ) programs serve the same purpose as land taxes—diverting some of the landowner's windfall to helping some poor people. This is true, but they don't do a good job. It's hard to think of a more inefficient way than IZ to transfer benefits from landowners to poor people. On the front end, IZ taxes new housing heavily (since the number of subsidized units grows as the number of market-rate units grows), and so discourages something that should be encouraged. Land taxes, by contrast, are not distorting, since the value of the land is based on its highest and best use, no matter what the current owner decides to do with it.

On the back end, IZ concentrates large benefits on a very few somewhat poor people, who are not selected on any principle beyond luck, and those benefits cost developers much more to produce than the recipients would be willing to pay for them; the recipients would be much better off if they could rent or sell their apartments on the open market and live where they wanted to—or even better off if they could just get the money the developer is giving up to rent them the apartment. With money from a land tax, programs with none of these drawbacks can be designed.

CONCLUSION

Paul Cheshire (2019) has called cities "the most welfare-enhancing invention in human history," and America's superstar cities are among the greatest examples ever of this invention. No places have ever seen as much valuable output and as many useful ideas produced per person or per acre—and at relatively small environmental cost. This great productive force is what ultimately causes the extraordinarily high land values that seem to be the cause of rising homelessness in these cities. But these land values, if they are managed well, can be the source of the solutions.

Addressing Homelessness with Unconditional Income

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Homelessness is often a problem that is the result of a host of other problems- both intrapsychic and macro-level problems- spanning areas of mental health, addiction, medicine, the economy, and society at large. The challenge of this Grand Challenge is to identify one all-encompassing policy/platform that can dramatically and sustainably end homelessness. Before I discuss my case for the Grand Challenge, allow me to describe some of my premises and considerations.

At the most proximal, fundamental level, the issue underlying homelessness is lack of financial security. What I mean by financial security is regular, stable income. Certainly, as already mentioned, homelessness is complex and can be a proxy for other problems. And of course, there are individuals who have stable income who continue to struggle with homelessness. But at its most basic core, the vast majority of homelessness is due to lack of consistent income to obtain and sustain housing. An essential part of addressing homelessness is a focus on prevention. Helping currently homeless individuals is important, but there's a much larger population of individuals who are at-risk of being homeless and it is necessary to dedicate resources to prevent them from becoming homeless.

Another consideration for the Grand Challenge is not only what would have the greatest population-level impact but would be politically viable and have broad support across the political spectrum. In a democratic country like ours, great ideas still require the support of a wide swath of people before they can be formally implemented, and it is "the people" who serve as the checks and balances. It is easy to have grand utopian ideas that could not be realistically or practically supported. It is also important to recognize that there is no panacea for homelessness.

In the 1970s under the Nixon Administration, bills proposing unconditional income were passed by the House of Representatives twice but never passed by the Senate.

A final consideration is an important balance between equality and freedom. Put simply, a society that enforces equality of outcomes is a society without individual freedom. What is freedom? Freedom is being allowed to make your own way in the world. The more degrees of freedom, the more varied the individual outcomes. Conversely, communist doctrines limit individual freedom and have a seductive aim of maximizing equality. However, it has proved to be disastrous throughout history with rampant poverty and homelessness, and the deaths of millions. These are stark statements because it is important to recognize unintended consequences of imposing equality and limiting freedoms in addressing homelessness, which can in turn, increase homelessness.

The proposal I submit is a system of unconditional income for the country. Unconditional income has been referred to by other names, such as universal basic income or guaranteed income. Essentially, a system of unconditional income would provide all adult citizens a basic, set amount of income on a regular basis (e.g., monthly) that would be unconditional and the same for everybody. It may sound radical and new, but actually the idea has been proposed numerous times throughout U.S. history and by various iconic figures from Founding Father Thomas Paine in the late 1700s who called it "natural inheritance", to Martin Luther King Jr. in the 1960s who called it a "guaranteed income" to contemporaries Mark Zuckerberg and Elon Musk who have publicly supported it. In the 1970s under the Nixon Administration, bills proposing unconditional income were passed by the House of Representatives twice but never passed by the Senate. In the 21st century, there has been a revival of the idea with recent proposals in Finland, Switzerland, and in several U.S. cities (e.g., Stockholm, CA is piloting this).

A single guaranteed income system could be a "game changer" in both preventing and ending homelessness in the country. Its most compelling aspect is that it is unconditional unlike various government subsidies or welfare payments which are conditional, can be stigmatizing, can disincentivize upward mobility due to reporting requirements, and can have other restrictive requirements tied to them. This system would not immediately replace the current 120+ welfare programs, but would over time, so that the large amount of government bureaucracy and resources spent on entitlements can be better used to support this unified system.

> **In 1968, a group of over 1,000 top economists penned an open letter to Congress that was published on the front page of the *New York Times* advocating for unconditional income** (New York Times, 1968).

Unconditional income would provide a financial safety net for those who need it and could be used to allay concerns from landlords about unstable income, help support geographic mobility to places with lower costs of living, and provide startup costs for savings, education, employment, and other meaningful life pursuits. The amount of the unconditional income would be at the subsistence level and would not be intended to be so generous that people would not work to supplement their income. But at the very least, it provides for a basic amount of income to survive, possibly accumulate, and spend as they choose to.

You may ask, how is a limited amount of income going to help those who are homeless living in high-cost metropolitan areas? As mentioned earlier, there is no panacea, but this system would provide an unconditional and necessary ingredient- a scaffolding for solutions. For example, an unconditional income system could help people "double up" in apartments, incentivize families to take in their homeless members, or allow people to take risks with employment without concern about losing their entitlement income. It may also increase geographic mobility, which may be a net positive for individuals and the country. An income of $1,000 in Los Angeles, CA may be insufficient for somebody to permanently exit homelessness there, but that same income is worth more in San Antonio, TX where the cost of living is lower, housing is more plentiful, and there may be more job opportunities and stronger social communities to support one's recovery.

Ideologically, it could be supported across various political parties including the Democratic, Republican, and Libertarian parties. On the one hand, it provides an income floor for those who are homeless and at-risk and can be viewed as partially redistributive. On the other hand, it is equal because everybody receives the same basic income, it could reduce government resources spent on entitlements, and still allow for individual freedom in financial choices. Of course, it is important to consider the costs of an unconditional income system and there have been various estimates made depending on the actual amount of the unconditional income. It is beyond the scope of this essay to delve into the economic details of the costs and the ideal amount of income for the overall costs. But suffice it to say, many economists have considered this question and concluded that it is feasible and sustainable. In 1968, a group of over 1,000 top economists penned an open letter to Congress that was published on the front page of the *New York Times* advocating for unconditional income (New York Times, 1968). In contemporary times, it was discussed and endorsed by Nobel Prize economists Christopher Pissarides and Daniel McFadden (Coppola, 2017).

Obviously, there are lots of other logistical issues that would need to be sorted out. The exact amount of unconditional income, how often it should change in line with inflation, and how often it is provided is unclear. Some type of national registration and disbursement system

would need to be developed to ensure everybody had equal access to income payments, including those with changing or unstable addresses. Special considerations would need to be made for non-citizens who would not be eligible for unconditional income under this system. In addition, there would be challenges in determining type and arrangement of payments for adults who have cognitive limitations in managing their own finances. This system may give rise to an even larger industry of predatory lending and contracts.

Another reason to consider unconditional income is that our current economic system of employment is bound to change. There are many developing technologies that are afoot and whether you are aware of it or not, we currently live in an era that is called the fourth industrial revolution with major advancements in robotics, artificial intelligence, and autonomous machines. This revolution will change our way of life, the work that we do, and how we earn income. Some experts have described scenarios of mass unemployment which have spurred various discussions about unconditional income, welfare, work retraining, and even basic survival (Schwab, 2017). An unconditional income would help tide us over in unstable times as we learn to evolve and adapt to changing environments. All of this will likely impact homelessness, including the number of new people who become homeless and the number of people who return to homelessness.

For all these reasons, I believe it is important to seriously consider a system of unconditional income in our country. As I mentioned, we are not alone in this proposal, as it has been considered before in our history and is currently being considered in other countries around the world. American exceptionalism requires our country to be exceptional in its ideas and their implementation. After many decades, America has not been particularly exceptional in addressing homelessness as it remains a tragic, difficult problem that too many Americans experience.

The Opportunity Cost of the Aging Adult Homeless Population

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THE PROBLEM

The homeless population is aging. While the aging of the post-War baby boom population in general might suggest that this is not at all surprising, the age structure of the adult homeless population is distinct. As shown in Figure 1, three decennial censuses have revealed a "cohort effect" among the adult homeless population (Easterlin, 1979). Most of the adult homeless population since 1990, and likely for several years before, is concentrated among the latter half of the post-War baby boom population, born between 1955 and 1965 (Culhane et al., 2013). This has persisted for thirty years, and the 2020 Census will undoubtedly reveal a continuation of that trend. In 2020, the average age in this cohort will be 60 in a population with a life expectancy of 64 (Metraux et al., 2011). This trend has important implications for homelessness assistance programs, which have not in recent history experienced elderly homelessness in significant numbers.

FIGURE 1: Age Distribution of Adult Male Shelter Users in the United States

% of Single Adult Male Homeless Population
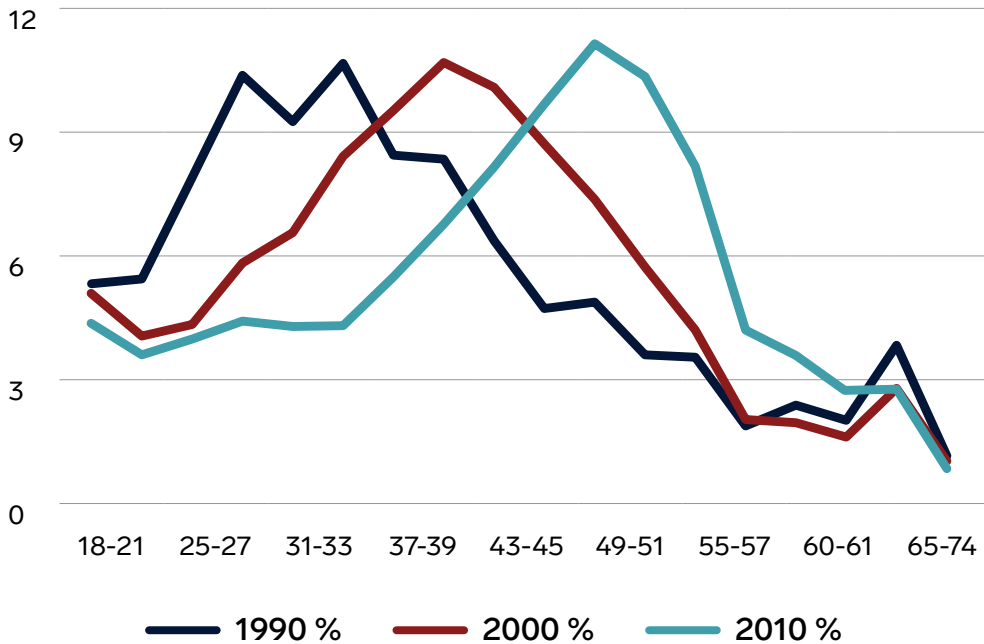
Source: Culhane et al. (2013)/U.S. Census Bureau Decennial Census Special Tabulation

In a recent three-city study (Los Angeles County, New York City and Boston), with colleagues we (Culhane et al., 2019) undertook a deeper examination of this trend; developed forecasts regarding implications for the health care and shelter systems; modeled a range of potential population-based interventions; and estimated how the costs of these interventions might be offset by reduced dependence on shelters, hospitals and nursing homes, based on the prior literature.

Among our key findings were these:

▶ The elderly homeless population (age 65 and over) is projected to triple between 2017 and 2030, even as the number of homeless adults from the 1955-1965 birth cohort declines due to mortality.

▶ As the adult homeless population ages, their health care costs are expected to increase to an average of about $15-20,000 annually, including significant nursing home costs. Shelter costs would also continue to rise, on average, to approximately $5-7,000 per person annually, resulting in a total estimated annual cost of about $20-27,000 per person.

▶ A population-based set of housing interventions (assuming some self-resolution) comprised of rapid rehousing, shallow subsidies, full subsidies, PSH (permanent supportive housing), and some assisted living, is projected to cost an average of $7,000-$11,000 annually per person per year.

▶ The average projected net offset in reduced hospital, nursing home and shelter use (approximately 1/3 of costs), is estimated to be roughly comparable to the overall average housing intervention costs, and under some scenarios could even save money. In other scenarios they would require only a modest additional investment.

The prospect that so many elderly people will be homeless, and the associated human misery that will result, should compel us to take action. That this will lead to disproportionate use of health, nursing home, and shelter services is further reason to respond. Even more compellingly, if we could instead fund housing solutions for this population, at no net increase in costs or even with some modest increase in costs, that would be an even clearer call to action. Unfortunately, shifting spending from health and shelter systems to housing solutions is not simple. Multiple stakeholders would have to be engaged, including the Centers for Medicare and Medicaid Services (CMS), state Medicaid agencies, managed care organizations (MCOs), hospitals, homelessness assistance programs, and housing providers.

IMPLICATIONS FOR POLICY AND PROGRAM DEVELOPMENT

Caring for the more than 2 million people who experience homelessness each year has become the responsibility of a network of nonprofit shelter and housing providers throughout the U.S., funded largely by the US Departments of Housing and Urban Development (HUD) and Veterans Affairs, as well as state and local governments. Yet, even with those efforts as many as 200,000 people live unsheltered each night, in places not meant for habitation (Henry et al., 2018). Clearly, this network is not able to provide adequate shelter to the population of people who experience homelessness, let alone *solve* their homelessness. Hospitals have also increasingly been noted to fill some gaps in the social safety net, as some people who are homeless cycle between hospitals and shelters (Treglia et al., 2019). Solving homelessness—even for the subset of elderly adults—will require new commitments of resources, new partnerships, and the scaling up of programs that have shown promise to work.

SSI Outreach. Given the accelerated aging of people who experience homelessness, many in this large cohort will be eligible for SSI due to increased morbidity and disability, and eventually due to age (at 65). SSI outreach is therefore a fundamental component of any effort to address aging homelessness. By increasing the incomes of these individuals, many will have increased access to housing, most likely in shared living arrangements, with family and friends, or in board and care homes. While the income may not be sufficient, and some subsidy may be required for some to attain housing, SSI will provide an important income stream to eligible persons, while drawing on a federal entitlement source. The SSI/SSDI Outreach, Access, and Recovery (SOAR) program should therefore be re-envisioned and expanded to take into account the increasing number of aged homeless adults who could benefit from this program.

Homelessness Prevention and "Housing Advice." About one third to one half of people in this aged cohort are experiencing homelessness for the first time (Brown et al., 2016; Culhane, 2014). Homelessness prevention, including landlord-tenant mediation, emergency cash assistance, debt relief, and some light touch case management, referred to in some European countries as "Housing Advice," should be made available in neighborhoods with high rates of shelter entry, and through Area Agencies on Aging (AAA). Prevention services could also be provided or referred from local jails, emergency departments, housing courts, and as part of utility termination warnings and notices.

Rapid Rehousing and Critical Time Intervention. For people who do not self-resolve with housing advice or prevention services (based on previous patterns of shelter use, one-quarter to one-third of shelter entrants will self-resolve), and whose homelessness persists for thirty days or more, rapid rehousing services should be provided. Rapid rehousing typically includes an assessment of client needs and strengths, followed by the development of a plan for rehousing. This should include housing search, move-in assistance and assistance negotiating housing terms with landlords, friends, family and other housing providers (e.g. board and care homes). In many cases, rapid rehousing includes temporary rental assistance, perhaps up to a year, to facilitate a transition to benefits or other sources of housing assistance. Referral to health and social services should be provided as indicated, and a review done of benefits eligibility and enrollment. Given the limited availability of subsidies, shared housing will need to be sought as often as possible, including with family, friends and roommates.

Because many if not most of the aged adults who are homeless will have some aging-related disabilities, some of the rapid rehousing services could be potentially funded through Medicaid (Culhane & Byrne, 2019). Critical Time Intervention (CTI) is an evidence-based behavioral health intervention that could be used as a model for rapid rehousing services for people with disabilities, whose transition to housing is part of their recovery and rehabilitation. While there are limits to what Medicaid can cover for cash assistance or rent, Medicaid managed care organizations could be enlisted as the payer for CTI, as health payers will also benefit from the avoidance of excess acute health care costs and nursing home placements. Hospitals, jails and shelters can serve as recruitment sources for program enrollment. CTI teams could be placed in these high-volume client settings; indeed, hospitals may want to expand their social work departments and discharge planning staff to include CTI teams for this purpose, obtaining reimbursement from MCOs and reducing their own liability for uncompensated care days. Hospitals also already generally employ care management teams whose job it is to improve care and keep people out of the hospital. CTI teams could be seen as an extension though—importantly from the healthcare system perspective—they would be a bit different from traditional care management in roles (which would extend to services to help people stabilize in housing) and level of "touch" (which is higher for CTI than for traditional hospital care management).

Shallow Subsidies. Some communities have experimented successfully with shallow subsidies as a supplement to SSI to assist clients in obtaining housing. New York City's HIV/AIDS Services Administration (HASA) housing program, the nation's largest shallow subsidy program, provides $400 as a monthly supplement to SSI for formerly homeless persons with HIV. Nearly 30,000 people live in housing with this combination of assistance, very often in shared living arrangements. Shallow subsidies have the advantage of being lower cost than a full voucher and more flexible than a typical federal housing voucher in terms of living arrangements. Los Angeles County successfully experimented with a similar shallow subsidy for homeless clients receiving General Relief, many of whom were also transitioned to SSI, resulting in a net savings to the County through reduced use of county-funded acute care services and cash assistance (Moreno, Toros, & Stevens, 2012). Shallow subsidies could be potentially funded from existing revenue sources for shelter, and supplant shelter costs, which in our study were found to average about $5-7,000 per person per year, which is greater than the potential cost of an annual shallow subsidy of $400 per month, or $4,800 per year. But it is also likely that some communities will have to find other state or local sources for this funding.

> **All of these proposed strategies will require advocacy and organizing to put the political and organizational alliances in place for implementation.**

Vouchers. For people for whom shared living arrangements are not possible, full housing vouchers may be necessary. Federal vouchers for people who are elderly (Section 202) or disabled (Section 811) could be targeted to address the population of homeless elderly persons who require them. Given their limited availability, additional vouchers may require Congressional authorization. The cost analyses developed from our multisite study could help to support a request for vouchers as an advance payment toward future health and shelter cost offsets. MCOs, hospitals, and local Continuums of Care (networks of local homeless service providers) could urge their local and state congressional leaders to support a program expansion for this purpose, as each would benefit from such a program, as well as their fellow homeless citizens.

Housing Support Services and Assisted Living. Some of the people assisted through either vouchers or shallow subsidies may have current or future needs for support services to help maintain their independence and to avoid nursing home placement. Like other aged persons receiving assisted living services and people with disabilities in supportive housing, these services should be eligible for reimbursement from Medicaid, including housing transition and stabilization services, case management or ACT services, and independent living services. At age 65, Medicare-funded services would also apply. Local services providers, continuums of care (CoCs), and hospitals should work with MCOs to make sure that funding is available for these supports, and to staff and train the workforce needed to deliver them. State Medicaid agencies will need to provide guidance to MCOs and may also need to provide support given that insured people often move among plans, and perhaps a pool of funds would need to be established to address shifting financial responsibility associated with "churn."

IMPLEMENTATION CHALLENGES

All of these proposed strategies will require advocacy and organizing to put the political and organizational alliances in place for implementation. At present, the likelihood of any major federal initiative seems slim, but federal leadership could certainly help. For example, the U.S.

Interagency Council on Homelessness could work with its federal agency partners to develop guidance for state Medicaid agencies, Area Agencies on Aging, and Continuums of Care on how they could collaborate in organizing a response. It would be useful to develop a "toolkit" that helps communities identify the scope of the problem, the potential interventions and collaboration opportunities, and the various roles and responsibilities that would need to be filled in a local or state plan. Federal technical assistance in support of local planning could also be developed. Local leadership councils could be organized to create plans with relevant stakeholders, including CoC leadership, hospital representatives, MCOs, housing authorities, landlords, and community agencies working on aging and housing issues.

Developing a plan that would work at the scale of the problem is always challenging. An incremental approach to local plans might be more realistic in the near term. In the immediate term, this could include piloting CTI programs at select hospitals with a high volume of homeless patients in order to work through the staffing and reimbursement model, while also demonstrating its cost effectiveness to payers. Initial efforts with shallow subsidies could be targeted to people over a certain age, like 62 or 65, and then moved progressively younger as capacity and experience with the program grows. Full subsidies could be targeted to people with higher threshold needs initially and then expanded with availability.[1]

CONCLUSION

As the second half of the post-War baby boom population ages, they are likely to remain disproportionately at risk for homelessness, and to dominate the ranks of the adult homeless population, as they have for the past three decades. With increased age will come increased costs for health and nursing home care, due both to increased morbidity and to the lack of stable housing in which they can manage their health care and recovery needs. Community partnerships across a variety of agencies will be required to develop and implement plans to address this problem at scale. Federal and state leadership will likely be critical to the success of those efforts. The prospect of ameliorating the human suffering that will accompany a forecasted tripling in the number of elderly homeless adults by 2030 should compel us to act. Our current system of homelessness assistance and the shuffling of people between hospitals, shelters, and nursing homes, is simply not adequate.

If we do nothing to address this emerging crisis directly, the costs to society will be significant. Alternatively, we can work proactively to identify housing solutions through which we can solve elderly homelessness and, in doing so, use those same resources more efficiently, effectively, and humanely.

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[1] It is noteworthy that our multisite forecasting study found that the bulk of the health care savings from the range of proposed housing solutions accrued to the largest and lowest cost subgroup, not to the much smaller high cost population often exclusively targeted for PSH.

Homelessness Among Older Adults: An Emerging Crisis

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Homelessness is increasing among older adults. In San Francisco in the early 1990s, approximately 11% of homeless adults were aged 50 and older. In 2003, 37% were (Hahn, Kushel, Bangsberg, Riley, & Moss, 2006). At the same time, other cities across North America were seeing similar rises. Now, the estimates are much higher. People born in the second half of the baby boom have had an elevated risk of homelessness throughout their lives: as this population ages, so does the population experiencing homelessness (Culhane, Metraux, & Bainbridge, 2010). This trend is expected to continue: the population aged 65 and over experiencing homelessness will triple by 2030(Culhane et al., 2019). Black Americans and Native Americans are disproportionately represented among homeless adults.

The aging of the homeless population has many implications for policy design and service delivery. Adults who are homeless in their 50s and 60s experience age-related health conditions worse than do people in the general population in their 70s and 80s (Brown et al., 2017). For this reason, we consider homeless adults 50 and over to be older adults, even if most services and programs that address the needs of older adults use higher age cut-offs.

Our research found that among homeless adults over 50, nearly half first experienced homelessness after they turned 50 (Brown et al., 2016).

Homeless adults in their 50s and 60s experience high prevalence of chronic diseases, geriatric conditions, victimization, and mental health concerns (Brown et al., 2017; Brown, Kiely, Bharel, & Mitchell, 2012; Tong, Kaplan, Guzman, Ponath, & Kushel, 2019). They have poor access to behavioral health care and high rates of use of acute care systems (Brown, Kiely, Bharel, Grande, & Mitchell, 2013; Raven et al., 2017). Their functional and cognitive impairments leave them at high risk of being placed in nursing homes, even if many could be successfully cared for in the community were they housed (Bamberger & Dobbins, 2015; Hurstak et al., 2017). Homeless adults 50 and older have high rates of death, with the most common causes being cardiovascular disease and cancer (Baggett et al., 2013; Roncarati et al., 2018) . While homelessness at any age has devastating health consequences, older adults are at particularly high risk. Effective responses to homelessness will have to adapt to the needs of older adults. There is an urgent need to address homelessness among older adults; to do so, we must understand the needs of this heterogeneous population.

Our research found that among homeless adults over 50, nearly half first experienced homelessness after they turned 50 (Brown et al., 2016). The pathways to homelessness differed substantially among older adults with early (before 50) and late onset homelessness, suggesting the need for different policy responses to prevent and end homelessness in these disparate populations. Older homeless adults who first became homeless before age 50 reported extremely high levels of severe childhood adversities and early onset of mental health and substance use problems. They reported low levels of high school completion, low levels of marriage/partnership and low workforce participation throughout their adult life. They reported high prevalence of traumatic brain injury, alcohol use disorders, and incarceration in state or federal prison. These conditions suggest that for the most part, this group will need interventions targeted to those with significant disabling behavioral conditions.

Those who first became homeless after age 50 reported dramatically different life course histories. For the most part, they had reached "typical" milestones, entering and remaining in the job market throughout their lives. They reported working throughout their life, often more than one job at a time, albeit in low-wage, physically demanding jobs. Sometime after

turning 50, they experienced one or more crises: they (or their spouse or partner) lost their job and couldn't compete on the job market; they (or their spouse) became ill and could no longer work in physically demanding jobs; their marriage broke up; their spouse or partner died, or their parent died. They reported facing multiple bureaucratic hurdles as they sought assistance to prevent their homelessness, with numerous lost opportunities to prevent their homelessness. With little to no savings, many barriers to accessing services, the older adults were unable to weather these crises, and became homeless. First-time homelessness among older adults requires p Help - we need more stationery for Philly olicy responses that address the drastic shortage of housing affordability for older adults, low-household income and the loss of traditional pensions, and the lack of income support for adults who lose their jobs or are unable to keep working before traditional retirement age.

For older homeless adults with significant behavioral disabilities and multiple barriers to re-housing, the optimal solution is likely a form of Permanent Supportive Housing (PSH), adapted for the needs of older adults. Permanent supportive housing (PSH), or subsidized housing coupled with voluntary supportive services offered on "housing first" principles (i.e. no requirement for sobriety or engagement in care prior to housing) is effective at housing people with chronic homelessness and disabling conditions (Aubry, Nelson, & Tsemberis, 2015; Kertesz, Baggett, O'Connell, Buck, & Kushel, 2016). Upwards of 85%

Providing appropriate personal care may be one of the most important, and difficult tasks.

of those who are engaged in PSH remain housed. With the aging of the homeless population (and the aging of long-term PSH residents), PSH must be adapted to meet the needs of older adults. In part, this includes environmental modifications including ensuring that PSH is wheelchair accessible; modifying bathrooms to have walk in showers, grab bars, and non-slip surfaces; insuring good lighting; and painting hallways different colors on different floors to assist wayfinding. In Los Angeles, there is a pilot of the Community Aging in Place (CAPABLE) program. CAPABLE, developed for low-income older adults, sends a nurse, occupational therapist and handyperson to their home to make necessary modifications. In the general community, CAPABLE improved outcomes and delayed nursing home entry (Spoelstra et al., 2019; Szanton et al., 2018; Szanton, Leff, Wolff, Roberts, & Gitlin, 2016; Szanton et al., 2019). Medicaid may pay for some home adaptations. Other environmental modifications to consider include ensuring adequate common space to promote social interactions and providing extra living space for caregivers.

Providing appropriate personal care may be one of the most important, and difficult tasks. Medicaid offers some form of personal care services for people who are living at home but are at high risk of requiring nursing home care, although these vary by state (Henry J Kaiser Family Foundation, 2018). While people who live in PSH are eligible for these services, many find them difficult to access since the client (or client's family) is responsible to hire, manage and supervise the care providers. There are, however, models of effective use of these services in PSH. In San Francisco, Homebridge hires, trains and supervises home care workers to work with multiple clients within the same PSH building. In San Diego and Boston, there are pilot programs which link PSH residences with the Program of All Inclusive Care for the Elderly (PACE).("PACE Participates in Boston Initiative Targeting Chronically Homeless Seniors," 2017; "St Paul's PACE,") PACE provides comprehensive medical and social services to frail elders (55 and over) who are dually eligible for Medicare and Medicaid. These programs should be assessed for their ability to keep older formerly homeless adults living in the community successfully and for their potential to be scaled.

Not all chronically homeless older adults will be able to have their needs met by adapted PSH. Others will need a higher level of care, including residential care facilities and nursing homes. Much work remains in determining which older adults should be placed immediately in these higher levels of care, without trying PSH first.

People who become homeless late in life may not require the behavioral supports that accompany PSH. Rather, what they need is housing that they can afford. Adults aged 50 and over who are renters have the highest prevalence of cost burdens among all Americans. Nationally, 50% of renters over 50 pay more than 30% of their household income in rent(Joint Center for Housing Studies of Harvard University, 2018). This leaves them little reserve to handle any financial shocks. Only one in three older adults who meet the criteria for housing assistance receive any.(Joint Center for Housing Studies of Harvard University, 2018) To prevent and end older adults' in-flow into homelessness, we need to address the housing affordability crisis that affects them adversely.

Despite their relatively young age, homeless people in their 50s and 60s have high rates of disabling conditions

Doing this will require political will and a focus on addressing both low household income and high housing costs. Increasing income among older adults is a critical part of the solution. Many low wage earners do not receive pensions and rely on Social Security benefits (Joint Center for Housing Studies of Harvard University, 2018). In addition to the need for job re-entry programs for older adults who have experienced job loss and do not have disabling conditions that preclude work, there needs to be an effort to insure that those who qualify for benefits receive them.

Despite their relatively young age, homeless people in their 50s and 60s have high rates of disabling conditions. We found this to be true both for those with late onset homelessness (who had work histories that would make them eligible for social security disability income (SSDI) and those with little or no work history, who could become eligible for SSI. One mechanism to improve access to these benefits would be to fund SOAR programs [SSI/SSDI Outreach, Access and Recovery] (Substance Abuse and Mental Health Services Administration). SOAR, developed by SAMHSA, provides services designed to increase access to Social Security Administration (SSA) disability benefits for eligible individuals who are experiencing or at risk of homelessness and have a mental illness, medical impairment, and/or a co-occurring substance use disorder. Because SSI has not kept up with the increased cost of living, states could adopt or increase the state supplemental payment to SSI to levels commensurate with the cost of living.

To end the housing affordability crisis, there needs to be a dramatic increase in affordable housing construction and preservation, particularly amongst extremely low-income individuals who make less than 30% of the Area Median Income (AMI). Bond measures and other local/state efforts to fund affordable housing should earmark funds for extremely low-income households. There is a need to re-invest in programs such as Section 202 housing, which provided capital advances and operating subsidies to create multi-family supportive housing for the elderly. Increasing the proportion of older adults who qualify for housing assistance, whether through Housing Choice vouchers or other programs, could have a similar effect.

In our research, we found that many older adults who experienced homelessness were in close touch with family members, and these family members offered a potential pathway out of homelessness. In general, older adults who spent time with family noted that they preferred staying with family over shelters, but did not want to live with family permanently. Both older adults and their family members spoke of many barriers to staying with family, including the potential loss of priority for permanent housing via coordinated entry (if the older adult was deemed to be housed during the time that they stayed with family), concerns about violating the lease (by having an additional person stay in the housing), the additional costs of having another household member, and concerns about privacy, crowding and relationships. To capitalize on the promise of having older homeless adults move in with family, there will need to be policies to support this practice (i.e. efforts to hold leaseholders harmless from eviction for bringing in a family member and shallow subsidies to defray additional costs) but also understanding the potential pitfalls. Coordinated entry systems could consider treating stays with family as akin to bridge housing or shelter, and not count time spent with family as housed for the purposes of coordinated entry.

Rising rates of vulnerable older adults experiencing homelessness demands a vigorous policy response. To prevent and end homelessness, we must address the root causes, including poverty and the lack of affordable housing. Understanding different pathways to homelessness among older adults with early versus late-onset homelessness, can help guide appropriate policy responses.

05

Ending Youth Homelessness

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Beginning in 2016, a multidisciplinary team at Chapin Hall at the University of Chicago conducted Voices of Youth Count (VoYC), the most comprehensive national research initiative to date focused solely on youth homelessness in America. This research responded to the Runaway and Homeless Youth Act (RHYA), through which Congress called for replicable national prevalence and incidence estimates of youth homelessness and data on the needs and characteristics of the population. Building on VoYC, Chapin Hall is working with partners across the country to improve methodologies for identifying and estimating youth homelessness, assess youth homelessness systems and support their strengthening around outcomes and youth collaboration, and develop and test innovative approaches to homelessness prevention and response.

YOUTH HOMELESSNESS INVOLVES UNIQUE CONSIDERATIONS AND CONSEQUENCES

Homelessness is not unique to youth, but youth homelessness carries unique considerations (Gaetz et al., 2013). Youth homelessness is particularly hidden and fluid, with young people often moving in and out of homelessness, and between different sleeping arrangements (such as sleeping on the streets, in cars, or couch surfing), over time (Morton et al., 2018a). Adolescence and young adulthood represent key periods for brain development, building social competencies, and human capital formation (Dumontheil, 2016; Fuhrmann et al., 2015). Further, researchers have found that youth homelessness is the single most common pathway into adult homelessness (Chamberlain & Johnson, 2013). Tackling youth homelessness is vital to both helping young people achieve their full potential and getting ahead of our nation's homelessness crisis overall.

YOUTH HOMELESSNESS IS STRIKINGLY PREVALENT

In the first ever nationally representative survey of homelessness among youth and young adults, we came to alarming conclusions. Our estimates indicate that at least 1 in 30 adolescents, ages 13–17, endures some form of homelessness within a 12-month period. With young adults, ages 18–25, the prevalence climbs even higher. One in ten young adults reported some form of homelessness within a year. About half of these were young people reporting couch surfing without a safe and stable living arrangement (Morton et al., 2017; Morton et al., 2018a).

Moreover, the prevalence rates were statistically equal between rural and non-rural communities. There are still more youth experiencing homelessness in urban communities because there are more people living in urban places. Yet, as a share of the population, youth homelessness is just as much of a problem in rural America as it is elsewhere (Morton et al., 2018b).

YOUTH HOMELESSNESS HAS ROOTS IN STRUCTURAL INEQUITY

Our research also underscores that not all youth share the same risk of experiencing homelessness. Youth of color have significantly higher homelessness prevalence as compared to their white non-Hispanic peers. Rates are especially high among American Indian and Alaska Native youth and African American youth. Our data also show that young people identifying as lesbian, gay, bisexual, transgender, or queer (LGBTQ) have more than double the risk of homelessness.

Certain experiences also indicate increased risk for homelessness. Lack of a high school diploma is the single factor that we found most strongly correlated with higher risk for homelessness among young adults. These young people had more than four and a half times the risk of homelessness as young adults who had attained at least a high school level of education. Youth experiencing homelessness also had disproportionately been in foster care and had spent time in juvenile detention, jail, or prison.

YOUTH HOMELESSNESS HAS ROOTS IN FAMILY ADVERSITY

Our research sheds new light on connections between youth and family homelessness. A large share of youth experiencing homelessness are parents themselves, struggling with housing instability while caring for young children. Moreover, nearly all young people link the beginning of their homelessness to earlier disruptions of family and home, including family homelessness and entry into foster care. One-quarter of youth we interviewed who endured unaccompanied homelessness when we interviewed them had prior experiences of family homelessness.

For youth, homelessness is about more than the lack of housing; it is about the lack or loss of relationships and connections that others can rely on more consistently for support, safety, and stability. In fact, a startling 35 percent of youth reported the death of at least one parent or primary caregiver (Samuels et al., 2019). Housing instability is but one factor that characterizes their journeys, which are typically shaped by significant trauma.

We can do better. We can take steps to make youth experiences of homelessness rare, brief, and one-time.

Clearly, the level of need documented in VoYC research grossly exceeds current federal investments in programs for youth experiencing homelessness. Some of the most directly relevant federal programs and expenditures for this population in FY2018 included the RHYA programs operated by HHS ($127M), the Education for Homeless Children and Youth (EHCY) program operated by ED ($85M), and the Youth Homelessness Demonstration Project (YHDP) operated by HUD ($80M) (Fernandes-Alcantara, 2019). With nearly 4 million youth and young adults experiencing some form of homelessness within a year, these investments fall well short of enabling an adequate and consistent continuum of services for youth experiencing homelessness across the country. By comparison, the federal government spends approximately $550M on a single B-21 bomber aircraft (Gertler, 2018).

Yet, ending youth homelessness takes more than additional resources; we also need more evidence-informed policies. To this end, Chapin Hall and USICH jointly organized a collaborative process that produced a set of federal recommendations based on findings from VoYC: *Federal Actions toward Preventing & Ending Youth Homelessness: Recommendations Based on Research and a National Convening of Experts and Stakeholders* (Morton & Horwitz, 2019). This report offers a number of opportunities for the federal government to make a difference across the work of different agencies.

Broadly, our research points to four critical directions for strengthening federal policy around youth homelessness.

1   *Support youth-centric coordinated response systems.* Few communities are successfully implementing developmentally appropriate coordinated outreach, entry, and assessment systems for youth. This absence leaves young people navigating disjointed and perplexing services in times of crisis. We have to invest in more cohesive, affirming, youth-centric systems that link programs together and improve young people's overall user experience.

Communities need investments in coordinated response, technical assistance, and funding that incentivizes collaborative community programming.[2] As outlined by USICH, community systems and programs should collectively measure and drive toward four core outcome areas: stable housing, permanent connections, education and employment, and social-emotional well-being. We recently **published a report** that provides guidance on tracking these outcomes for communities (Morton et al., 2019a). Federal grantmaking and technical assistance can support service providers, evaluators, and communities in this work.

At the core of devising effective, youth-centric coordinated responses is authentic youth collaboration in decision-making. The federal government can encourage communities to actualize this through youth action boards in which young people with lived experience are paid, trained, and empowered to have real influence on their systems of care. Similarly, a public-private partnership at the federal level could form an independent group of youth and young adults with lived experience of homelessness who advise federal decisions and actions across federal agencies, coordinated by USICH.

2   *Tackle inequities related to race and LGBTQ identity.* The VoYC national survey data show that American Indian and Alaska Native, black, Hispanic, and multiracial youth have significantly higher rates of homelessness than youth who identify as white. Youth of color who identified as LGBTQ had even higher rates of homelessness. These findings point to the need to acknowledge and address structural racism and biases that lead to these disproportionalities.

A comprehensive examination of public agencies' historic roles in perpetuating racial and ethnic inequity is needed. With respect to its impact on youth homelessness, we suggest a review organized by USICH with considerable input from national leaders of color and youth with lived experience of homelessness. Building on these activities,

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[2]   The USICH *Criteria and Benchmarks for Achieving the Goal of Ending Youth Homelessness* and emerging lessons from the HUD YHDP communities can help guide coordinated response efforts going forward.

the federal government should develop a clear strategy and accountability measures for interrupting cycles of oppression, discrimination, and disenfranchisement in their engagement of racially marginalized youth and communities.

Further, all federal agencies funding programs for youth homelessness should require collection, reporting, and analysis of data that addresses equity by race (including nuanced measurement approaches that account for complex and multiracial identities), sexual orientation, gender identity, and other factors—including youth-level, agency staffing, and systems data.

3 *Increase multi-system efforts on prevention and early intervention.* Our research underscores youth homelessness as a significant national challenge with complex causes, warranting a public health response. This includes greater focus on prevention and early intervention for maximum population-level impact (Morton & Horwitz, 2019). At the most "upstream" level, prevention includes tackling underlying socioeconomic determinants of youth homelessness, such as structural racism, unaffordable housing, poverty, and inequality.
An Administration could also target prevention through specific public systems. For example, schools, justice systems, child welfare systems, and behavioral health systems could be supported or required by the federal government to routinely screen for risk for homelessness among young people in their care and to coordinate appropriate service connections for young people and their families.

The Family First Prevention Services Act (FFPSA) presents important opportunities to strengthen vulnerable families as a means to prevent youth homelessness and other adverse outcomes. Working with national organizations and researchers, an Administration could identify, promote, and fund opportunities to leverage provisions in the FFPSA that impact housing stability and prevent homelessness and encourage connections with the home-based services offered under the RHYA's basic center programs. The Prevention Services Clearinghouse requires careful evaluation of prevention programs and is under-resourced given the scope of prevention programs and opportunities.

Early intervention is vital to preventing burgeoning crises from escalating to entrenched forms of homelessness. Several mechanisms exist within federal programs for early intervention—such as student homelessness contacts and services in schools, street outreach programs and drop-in centers, and basic center programs that provide short-term youth shelter and youth and family services. These, however, are under-resourced in most communities and need better evaluation into how they can work best.

4 *Treat research and evaluation as indispensable investments.* This includes funding continued national estimates over time on the prevalence, incidence, and characteristics of youth homelessness. The federal government plays a critical role in supporting data to inform policy in a broad range of areas. We encourage an Administration to similarly consider its role in enabling the enhancement and replication of national estimates data on youth homelessness so that we can track our progress toward the goal of ending youth homelessness and tailor strategies as needed. We cannot end youth homelessness in the dark.

This also includes investment in rigorous evaluation. Our systematic review of interventions to address youth homelessness shows significant evidence gaps in a number of key areas (Morton et al., 2019b). Most evaluations have assessed counseling and case management interventions on young people's behavioral health and well-being outcomes. Relatively few evaluations have assessed the impacts of interventions on preventing or reducing their homelessness and housing instability. In general, the shelter and housing program models funded by HHS and HUD have been subject to very little rigorous evaluation for youth. The federal government can partner with philanthropy and research institutions to refine and evaluate promising programs and strengthen the capacity of systems and services to implement them.

Youth homelessness is a broad and hidden challenge with deep roots in family adversities and structural inequalities. At the same time, youth homelessness is a solvable problem. Ending youth homelessness will require more resources, and smarter, more coordinated actions across systems and services, supported over time by investments in innovation and research.

Tackling this challenge is worth our efforts. The success of our young people has a direct impact on the success of our country. As long as housing instability, homelessness, and related adversity diminish the likelihood of our young people living up to their potential, we do not live up to our potential as a nation.

DISCLAIMER

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ACKNOWLEDGEMENTS

06

Ending Homelessness by Addressing Racial Inequities

Amanda Andere

CEO, Funders Together
to End Homelessness

The United States is in the midst of an affordable housing crisis and has been for decades. And because of it, another crisis has been spurred: homelessness among our communities. While homelessness has fallen over the past decade by nearly fourteen percent, it is still affecting more than half a million people (National Alliance to End Homelessness, 2019). There still seems to be unneeded disagreement over the correct methodology and solution to ensure that homelessness is truly rare, brief, and one-time.

We know what ends homelessness and it's quite simple. The answer is a home. However, the way we go about initiating this solution differs greatly depending on a variety of factors and the long-term effectiveness is contingent on the policies in place.

WHY RACIAL EQUITY?

Homelessness is not the result of a failing individual, but rather a symptom of failing systems. And the people who are failed most by these systems are people of color. In fact, black people account for more than 40 percent of people experiencing homelessness despite comprising only 13 percent of the total U.S. population (U.S. Department of Housing and Urban Development, 2018). What's more is that people of color experience homelessness at much higher rates than their white peers (Olivet et al., 2018). And this is by no accident.

Structural racism created and now perpetuates this disproportionality. Racism in the housing system is deeply embedded in our nation's history and was supported through redlining and mortgage discrimination. Decades later, these policies have produced effects that are still evident today and have created disparities within not only housing, but connected sectors such as health, education, and the workforce. If we want to end homelessness, racial equity needs to be at the center of the work.

CENTERING RACIAL EQUITY IN POLICIES AND PRACTICES TO END HOMELESSNESS

Since policies rooted deep in structural racism created racial disparities in housing, we must acknowledge that changing these policies and practices is how we will end the inequities that exist. This means going beyond simply naming racial equity and instead deliberately prioritizing and embedding it in all policies and the solutions that are supported by these policies. Doing this requires intentionality and an understanding of the white dominant culture in which homelessness and intersecting systems work within. It is multi-faceted and takes work that is built in layers to achieve the greatest equitable approach possible. When crafting policies that affect housing and homelessness efforts, it is vital to take into account key best practices and considerations to guarantee racial equity stays at the forefront.

SAY NO TO A COLORBLIND APPROACH

First and foremost, it is critical to acknowledge that a colorblind approach to ending homelessness will only exacerbate the problem and won't allow us to effectively identify targeted solutions for people of color. The colorblind strategies currently in place only end up failing those who are disproportionally affected, which is evident by the present crisis.

EVALUATE POLICIES, TOOLS, AND ANALYSIS WITH A RACIAL EQUITY LENS

Currently, the policies, tools, and analysis we use to determine and prioritize needs have most likely been normalized on white, straight, males. These strategies haven't been evaluated with or updated to include a racial equity lens. Nor have they been implemented in a way that ensures users are adequately trained to recognize and acknowledge inherent racial bias. It is crucial we reexamine the mechanisms in place and actively seek to disrupt the current ways in which they work in order to turn them into mechanisms that go beyond just being tailored to white people to instead prioritize those who are most affected. It is also important to ensure those that are using and implementing these tools and analysis are participating in ongoing trainings around cultural competency, institutional racism, implicit bias, and other relevant race-focused and informed learning opportunities. This ongoing education ensures that the embedding of racial equity into strategies will remain prioritized and elevated.

DISAGGREGATE DATA INTENTIONALLY

The housing and homelessness sectors are rich in data, but poor in useable and actionable information. We seem to have a plethora of data but aren't utilizing it to the best of our abilities in a way that can move the needle on ending homelessness. Working with every gatekeeper within the system, we should deliberately disaggregate data with racial equity in mind and advocate for data-sharing between intersecting systems, like the criminal justice system, to engage in more meaningful cross-sector work.

PRIORITIZE CROSS-SECTOR WORK

Preventing and ending homelessness cannot be done in a silo. Racial disparities are not confined to just the housing and the homelessness system. Inequities are widespread in the workforce, in educational systems, and in the delivery of health care. The policies that affect these intersecting issues do not operate in a vacuum. These are systems that feed into homelessness and even if every effort is made to eliminate inequities in housing and homelessness, if they aren't also addressed within connected systems, people of color will still experience housing instability at a disproportional rate.

CENTER PEOPLE WITH LIVED EXPERIENCE

While data will inform processes and give us a technical view of the solutions at work, there is certain information we can only gain from listening to those with lived experience. We often say that those who are closest to the problem are the ones who are closest to the solution. As we are considering how to best serve people of color experiencing homelessness and end racial disparities, we must center people with lived experience in policies and solutions by including them, not only at a narrative informed level, but in the decision-making process itself. When we ignore the expertise of those who have experienced homelessness, we are at risk of taking the colorblind approach we need to avoid.

BUILD PUBLIC-PRIVATE PARTNERSHIPS TO SUPPORT RACIAL EQUITY WORK

To ensure that this work is both lifted and implemented in communities across the country, collaboration is needed between stakeholders in the public and private sector to initiate innovation and accountability. Philanthropic organizations can collaborate together and build partnerships through public and private relationships to provide a critical backbone to advancing racial equity. This collaboration, both within philanthropy and together with the public sector, can support and ensure that efforts to build strong and sustainable programs both center people with lived experience and prioritize racial equity. This is the model to effectively create systems change at both the local and national levels. This can also lead to taking innovative solutions and practices to scale by private philanthropy leveraging government funds.

Preventing and ending homelessness does not have a one-size-fits-all solution, especially when that solution needs to account for the diversity of people who are affected by homelessness. If we want to end homelessness, but do not include a racial equity lens in all aspects of our work, we will fail at our mission to ensure homelessness is rare, brief, and one-time. This work starts with policy changes and with those changes, we must keep racial equity at the forefront. As we are creating housing and homelessness policies, implementing best practices that are proven to be effective in ending racial disparities is the only pathway that will lead to also ending homelessness.

07

Homelessness is a Housing Problem

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In our book, *In the Midst of Plenty: Homelessness and What To Do About It* (Shinn & Khadduri, forthcoming), we argue that homelessness in the United States is, at base, a problem of lack of affordable housing. Several lines of evidence support this conclusion: Modern homelessness arose when the surplus of housing units affordable to people at the bottom of the income distribution turned into a deficit. At the start of the 1970s, there was a slight surplus in units that people at the top of the poorest quartile of renters could afford, paying no more than 30% of their income for housing. By 1980, there were 6.4 million households in the bottom quartile, but only 3.5 million units that they could afford (Dolbeare, 1991, 1992). As of 2015, 8.3 million households with incomes below half of the median income for their area had no housing subsidy and paid over 50% of their income for rent (Watson, Steffan, Martin, & Vandenbroucke, 2017). Homelessness is most common in the most expensive rental markets (Joint Center for Housing Studies of Harvard University, 2017). And housing subsidies that make housing affordable prevent and end homelessness.

Vouchers are not the only way to make housing more affordable.

Affordable housing in the form of Housing Choice Vouchers, which hold a household's housing expenditures to roughly 30% of its income, prevented homelessness among poor families enrolled in the Housing Voucher for Welfare Families experiment (Wood et al., 2008). Similarly, housing subsidies ended homelessness for families recruited in shelters across 12 sites in the Family Options experiment. No other intervention — rapid re-housing, transitional housing, or usual care consisting of extended stays in the shelter system with more limited access to the other options — came close (Gubits et al., 2018). Although some groups such as people with serious and enduring mental illnesses will need additional supports — we are partial to the Pathways Housing First model (Tsemberis, 2010) — everyone needs housing that is affordable.

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Thus, the closest thing we have to a magic bullet to end homelessness would be a large-scale expansion of the Housing Choice Voucher program. The Bipartisan Policy Center calculated that adding 2.9 million new housing subsidies by 2023, an attainable policy goal, would cover the need if eligibility was limited to households with less than 30% of the median income in their area, or about the poverty level (Bipartisan Policy Center, 2015). Vouchers need to be administered by public housing authorities, so 2.9 million new vouchers could not be created overnight, but it is plausible to return to a time in the late 1970s when the program added roughly 300,000 incremental housing subsidies per year (Weicher, 2012). A National Academies of Science, Engineering, and Medicine panel (2019) charged with coming up with policies to halve child poverty proposed two packages of policies that would do so. One of their packages featured an expansion of the Housing Choice Voucher program to cover 70% of eligible households, along with some of the income strategies we survey next.

Vouchers are not the only way to make housing more affordable. Because housing affordability is a joint function of incomes (at the bottom of the income distribution) and housing costs (for modest units), anything that raises poor people's disposable income or reduces housing costs will help.

On the income side of the equation, our book reviews strategies such as raising the minimum wage, expanding the Earned Income Tax Credit, particularly making it more generous for households without children, or possibly tying it to rent burdens. Benefit programs such as the Supplemental Nutrition Assistance Program (SNAP, or food stamps), Temporary Aid to Needy Families (TANF or welfare), and Supplemental Security Income and Social Security Disability Trust (SSI/SSDI) programs for people with disabilities could be made more generous. Particularly in the case of TANF, for families, and SNAP, for individuals, enrollment could be increased. Programs such as the Child Care Tax Credit, or child allowances more common in

other developed countries than in the United States are additional options. Efforts to counteract income volatility can help people to weather tough times. In addition to polices that affect incomes directly, policies that give workers more bargaining power to negotiate for a larger share of the economic pie can have an indirect effect. These policies trade off with one another — if workers earn more, then transfer (benefit) programs can be less extensive.

On the housing side of the equation, we consider various ways to make housing subsidies less expensive or to target them to households in greatest need. Although the Family Options experiment did not find short-term rapid re-housing subsidies of about 6 to 8 months to be more effective than usual care in helping families attain housing stability (Gubits et al., 2018), it is possible that longer time-limited subsidies (perhaps tied to the age of the youngest child) or long-term subsidies that are less generous than Housing Choice Vouchers could be tried. A renters' tax credit or other rent subsidy delivered to tenants or landlords could be administered through the tax system and would parallel the way society uses the tax system to help homeowners through deductibility of mortgage interest payments and real estate taxes.

Supply-side subsidies for affordable rental housing may be important in areas with the greatest shortages. The National Housing Trust Fund is better targeted in this way than the Low-Income Housing Tax Credit and could be expanded and permitted to be used for either supply or tenant-based subsidies. Overturning exclusionary zoning can make housing construction cheaper. For example, Minneapolis is overturning single-family zoning, making duplexes and triplexes legal everywhere in the city (Mervosh, 2018) and California recently updated laws permitting "accessory dwelling units" or granny flats (California Department of Housing and Community Development, 2018). Alternative forms of housing such as a return to single-room occupancy hotels (the British "bed-sit") or other co-housing programs where residents have small private spaces and share common amenities can hold down costs. Again, housing strategies trade off with one another and with income strategies in bringing housing costs to levels that poor people can pay.

Finland has largely ended literal homelessness as the U.S. defines it by following some of the principles of Housing First (emphasizing consumer choice and not requiring services before people get housing) if not the full Pathways to Housing model. Because "housing naturally cannot be provided unless apartments exist," the Y-Foundation bought up housing all over the country, becoming one of Finland's largest landlords, and made it available cheaply (Y-Foundation, 2017, p. 10). Finland already had robust income supports.

Although the central driver of homelessness, we argue, is lack of affordable housing, it will also be important to tackle forms of racism and social exclusion that lead to black and Native Americans and people with mental illnesses to have higher rates of homelessness than others. This includes discrimination in income and employment, wealth, incarceration, and housing. Racial disparities in wealth are much greater than disparities in income and are driven in part by past government (*de jure*) discrimination, for example the Federal Housing Administration's discrimination in insuring mortgages and local zoning ordinances (Massey & Denton, 1992; Rothstein, 2017). Thus, we suggest, government is obligated to work to dismantle it. HUD's Affirmatively Furthering Fair Housing Rule, finally published in 2015 nearly half a century after it was authorized by the Fair Housing Act, and then put on hold by the current administration, requires communities to develop specific plans to undo the harms of segregation as a condition of receiving HUD funds. Robust enforcement of anti-discrimination legislation in housing and employment on the basis of race and disability, reductions in incarceration, and enforcement of the mandate to affirmative further fair housing need to be paired with strategies to raise incomes, lower housing costs, and provide subsidies where these are still out of balance. We argue that we know how to go about ending homelessness, we must marshal the political will to do so.

Three Housing Strategies to End Homelessness: Is There Political Leadership to Get There?

Nan Roman

President & CEO, National Alliance to End Homelessness

Diane Yentel

President & CEO, National Low Income Housing Coalition

Affordable housing is the primary cause of homelessness, and also its solution. We have the data and proven solutions to end homelessness, and in the wealthiest nation in the world, we have the resources to solve the problem. We lack only the political will to fund the solutions at the scale necessary.

LACK OF AFFORDABLE HOUSING DRIVES HOMELESSNESS

As rents rise and wages stagnate, more people experience homelessness. Rental housing affordability has markedly worsened over the past 15 years, and it is most negatively impacting the lowest income people. Over 10 million households with extremely low incomes are either homeless or cannot afford their housing, which forces them to make untenable choices between paying the rent and obtaining other necessities like nutritious food, transportation, and health care.

Out of over 3,000 counties in the nation, there are only 22 in which a full-time worker earning minimum wage can afford a modest one-bedroom rental home, and there are none where they can afford a modest two-bedroom apartment (Aurand et al., 2018). A full-time worker earning the minimum federal hourly wage of $7.25 per hour needs to work approximately 122 hours per week every single week of the year to afford a two-bedroom rental home at the national average fair market rent (Aurand et al., 2018). The number of households that either pay more than half their income for rent or live in severely substandard housing, and who receive no assistance, has risen 66 percent since 2001 (Mazzara, 2017). Nationally, there are only 37 affordable and available homes for every 100 extremely low-income renter households (Aurand et al., 2019).

This has not always been the case. In the 1970s, for example, neighborhoods enjoyed an ample supply of affordable dwellings, so when someone experienced an unforeseen crisis and lost housing, they could swiftly find another place to call home. By the mid-1980s, however, the supply of affordable homes had decreased significantly due to urban renewal, conversion of rental apartments to condominiums, and years of deep federal budget cuts, among other causes. Since that time, rents have continually risen, and people of modest means have endured stagnant wages. Over the last several decades, renters' wages have increased by 5% while rents have risen 61% (Joint Center for Housing Studies of Harvard University, 2018).

The data are clear: as housing becomes less affordable, homelessness increases. In fact, research shows that cities in which residents spend over 32% of their income on rent experience a rapid rise in homelessness. In many areas of the country, even small rent increases can place thousands of vulnerable people at heightened risk of homelessness (Glynn & Casey, 2018).

Homelessness and housing insecurity disproportionately impact people of color. African Americans represent 13 percent of the general population but account for 40 percent of people experiencing homelessness and more than 50 percent of homeless families with children (Crawford 2019). Additionally, Black, Native American, and Hispanic households are more likely than white households to be extremely low-income renters. Twenty percent of Black households, 18% of American Indian or Alaska Native (AIAN) households, and 16% of Hispanic households are extremely low-income renters. Six percent of white non-Hispanic households are extremely low-income renters (Aurand et al., 2019).

AN AMBITIOUS FEDERAL POLICY AGENDA

Failures of both public policy and the private market have contributed to today's housing affordability crisis, which has in turn caused widespread homelessness. Many public and private institutions must play a role in developing solutions, but the federal government is key. To be clear: the shortage of affordable rental homes for the lowest income people is largely due to chronic federal under-funding and mis-guided federal policies.

Federal investments in affordable housing have been declining for decades. Adjusting for inflation, the federal budget authority for housing assistance in the 1970s was about three times what it is today (Office of Management and Budget, 2018), even though there have been major increases in the number of low-income renters who need help (Joint Center for Housing Studies of Harvard University, 2018). Today, only one in four households eligible for federal housing assistance receives it due to lack of funding (Center on Budget and Policy Priorities, 2017a).

Further, federal policies have failed to preserve the existing supply of affordable housing, much less increase it to meet demand. Federally owned public housing has been starved of funding for maintenance and repairs, resulting in the removal of 250,000 units from the inventory since the mid-1990s, only a small fraction of which have been replaced (Center on Budget and Policy Priorities, 2017b). The number of households living in privately owned but publicly subsidized apartments declined 22 percent between 1993 and 2007 because of loss of supply (Kingsley, 2017). Several million more such units will see their subsidies expire over the next few years. New affordable units get built, but not enough. According to the National Housing Trust, 100,000 affordable units are added to the inventory every year, but for each new one, two others are lost through deterioration, abandonment, or conversion to market-rate housing (Hayward, 2017).

> **In 1968, a group of over 1,000 top economists penned an open letter to Congress that was published on the front page of the *New York Times* advocating for unconditional income** (New York Times, 1968).

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Finally, federal housing policy has historically discriminated against African Americans and other people of color through strategies such as housing segregation, discriminatory financing, redlining, enforcement of exclusionary zoning, and neighborhood clearance. These strategies not only resulted in the loss of affordable housing units, but contributed to the disproportionate percentage of African Americans who are homeless today.

The federal government does spend money on housing. But most is not directed to those with the most serious housing problems or the highest likelihood of homelessness. The federal government spends more on assisting higher income households (making over $100,000) to purchase homes than it spends assisting the lowest income (poverty level and below) households to rent homes (Fischer & Sard, 2017).

Without action from the federal government, quality affordable homes for the lowest-income people cannot be consistently built, operated, or maintained to scale. Without more rental assistance, the lowest income people — those most likely to become homeless — will not be able to pay the rent. Government subsidies are necessary to fill the gap between what people can afford to pay and the costs of developing, operating, and living in rental homes. This is a gap that the private market is not going to fill. These are investments that

the federal government can afford to make and that will generate economic returns in the form of reduced homelessness, lower healthcare costs, higher educational attainment, and increased employment.

To address these needs, we recommend the following three strategies: 1) provide rental assistance to those extremely low income households that need it; 2) expand the supply of housing that is affordable to extremely low income people; and 3) establish a flexible fund to help those with short term housing crises avoid becoming homeless.

Rental Assistance. Because rents are far outpacing wages for the lowest income people, a substantial expansion of rental assistance is a necessary element of any successful strategy to solve the affordable housing crisis and reduce homelessness. The most well-known type of rental assistance is the Housing Choice Voucher program, which helps people with the lowest incomes afford housing in the private market by paying landlords the difference between what a household can afford (30% of their income is the federal standard), and the rent itself, up to a reasonable amount. Housing vouchers are structured flexibly, meaning that households can use them to rent homes that best meet their needs, including homes located in high-opportunity neighborhoods. Housing vouchers can also be tied to a specific housing development. An alternative to an increase in vouchers might be a renters' tax credit focused on the lowest income people.

Expand the Affordable Housing Stock. Increasing poor people's ability to pay the rent should increase production, but in high cost markets it would be necessary to subsidize the building and preservation of affordable units. There are several existing vehicles through which this could be accomplished. The national Housing Trust Fund (HTF) is a dedicated funding stream for building, rehabilitating, and preserving (and also operating) rental housing for extremely low-income people. The HTF is currently funded through fees on Fannie Mae and Freddie Mac and operates as a block grant to states. The Low Income Housing Tax Credit (LIHTC) is an indirect federal subsidy which gives investors a reduction in their federal taxes in exchange for financing affordable rental housing construction or rehabilitation. It allows units to be rented at below-market prices[3], although rental subsidies are still needed to house extremely low income people.

Flexible Short-Term Crisis Assistance. Four in ten Americans say that they do not have enough emergency savings to cover an unexpected $400 expense (Federal Reserve Board of Governors, 2017). Before they became homeless, many households were living month-to-month, spending a huge percentage of their income on rent with little or no cushion for any unexpected expense. A broken-down car, sick child, or loss of hours at work may have resulted in their inability to pay the rent, eviction and homelessness. A small amount of flexible funding could have averted the human, social and economic costs of homelessness, yet such funding is rarely available.

We propose the creation of a "National Housing Stabilization Fund" which would provide emergency financial assistance to help households overcome short-term crises that directly impact their housing stability. Such funding should be linked to access to services to help the household stabilize and address any other needs.[4]

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[3] It should be noted that at present, the incomes of extremely low-income households are not sufficient to cover even the operating costs of the majority of housing units developed by these programs without rental subsidy. So rental subsidies may still be required in affordable units created through these and other means.

[4] It should be noted that three similar policy recommendations were made by the Bipartisan Policy Center Housing Commission (of which one of the authors was a member), and the Opportunity Starts at Home campaign (of which both authors are founders). Housing America's Future: New Directions for National Policy. Bipartisan Policy Center, February 2013, Washington DC. *Within Reach: Ambitious Federal Solutions to Meet the Housing Needs of the Most Vulnerable People.* Opportunity Starts at Home, Washington DC https://nlihc.org/sites/default/files/OSAH_Policy-Agenda.pdf

LEVERAGING FEDERAL INVESTMENTS

While the federal financial investments are key, there are many state and local policies, practices and investments that affect housing affordability and stability. While federal policy does not control state and local policy, incentives and disincentives can be built into federal funding streams to encourage best practices at the state and local levels. Examples would be to link federal transportation, infrastructure or block grant funds to things like: laws forbidding source of income discrimination; right to counsel for tenants in eviction cases; and elimination of burdensome, discriminatory and restrictive zoning and housing code provisions.

CONCLUSION

The solution to homelessness is obvious: affordable homes. When people experiencing homelessness return to housing, they gain the platform they need to address any other challenges they may have: employment, health, education, or mental illness. Their children do better in school, they can make it to their jobs every day, and they can connect with family, the church, community groups and other supports in the community. Without an adequate supply of safe, decent, affordable housing, many people are likely to continue to cycle in and out of homelessness. We have the data, the solutions, the public support, and the financial means to make sure everyone in our nation has a place to live, and to end homelessness. It will take the political will to do so.

09

We Can End Homelessness, If We Choose To: Policy Recommendations For 2020

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INTRODUCTION

In the nearly forty years since this era of homelessness began, programs have been developed that can effectively house and support anyone who is homeless among the different segments of the homeless population. There are proven solutions for ending homelessness for families, youths, and adults. Programs exist for individuals with severe mental illness and addiction that engage and house them--and successfully keep them housed. Despite the existence of such programs and the considerable body of evidence supporting their effectiveness, the number of people experiencing homelessness on a national scale is increasing. The question addressed in this essay is: given that effective programs exist, what policies do we need to enact to end homelessness?

CURRENT HOMELESS POLICY

Within the homeless provider industry there are two major factions: one advocates for increased funding for emergency programs (shelters and transitional accommodation) and the other advocates for permanent supportive housing (affordable housing with services and rental assistance). The first faction has dominated homeless services for decades and continues to do so, but the second faction has been gaining traction in the past 10 years. Federal and local authorities appease both groups by providing some funding for each. Yet many politicians, providers and the citizens continue to lobby for more of the same— emergency, time-limited, stopgap measures.

Early on, homeless programs funded by the U.S. Department of Housing and Urban Development (HUD) were based on the commonly held (but mistaken) assumption that homelessness was primarily the *result* of mental illness or addiction. Thus, substantial funding went to programs that engaged homeless persons in treatment as a first step to prepare for and eventually be rewarded with housing. In this linear, step by step model, going from outreach to permanent housing was often a journey of many years (Ridgway and Zipple,1990). Current homeless policies reflect this emphasis on temporary solutions over longer-term investments.

THE NEED FOR A NATIONAL AFFORDABLE HOUSING STRATEGY

Dolbeare and Crowley (2002) demonstrated how neo-liberal policies introduced during President Reagans' administration instigated the decades-long era of homelessness. Slashing the budgets of government housing programs, compounded by rising rents resulting from gentrification, created the homelessness crisis we see today. Since housing ends homelessness, here are five policy recommendations to develop affordable housing on a large scale.

POLICY RECOMMENDATION 1: **Scale Up Investment in Affordable Housing.**

▷ Invest in building, rehabbing or acquiring hundreds of thousands of units of affordable housing. The Low-Income Housing Tax Credit (LIHTC) would help to offset the huge gap left by federal cuts. This should also include a strong investment over a ten-year period in the National Housing Trust Fund (NHTF). Presidential candidate Elizabeth Warren recently proposed $450 billion be invested in the NHTF as significantly more will be needed than HUD's projected 2020 annual budget of $44 billion. (https://bit.ly/2zvSK7T)

▷ Designate the development and/or rehabilitation of affordable housing as part of national infrastructure and fund at the same level as highways and bridges.

▷ Re-introduce an estate tax and introduce bills to tax the wealthiest modeled after Proposition 63 in California, known as the "millionaires' tax."

▷ Create a real estate tax where 1% of every real estate closing is contributed to the NHTF.

POLICY RECOMMENDATION 2: **Preserve and protect access to affordable housing.**

▷ Significantly increase the availability of Tenant-Based Housing Choice Vouchers.

▷ Create incentives through legislation (federal, state, municipal) to control rising rents. While rent control is gaining favor in more cities, freezing rents—a law recently enacted by Berlin Germany to last 5 years—would provide even more relief.

▷ Enact a renters' tax credit for families to make rents more affordable.

Permanent Supportive Housing and Housing First

Permanent supportive housing (PSH) most often refers to single-site buildings whose tenants are all program participants and support services are on-site. It can also refer to units scattered throughout different neighborhoods that are occupied by program participants in buildings where the majority of units are occupied by non-program tenants. This is called "scatter-site housing" and in this model the support services are off-site. Both types of PSH housing are designed to support high-needs chronically homeless adults (a HUD priority target population). While some PSH programs adhere to principles of Housing First (harm reduction, no requirement for treatment or sobriety as a condition of housing) most single-site programs enforce rules associated with treatment compliance and program management (curfews, abstinence, visiting hours, etc.) (Padgett, Henwood & Tsemberis, 2016).

PSH single-site buildings are popular in the homeless service industry and have some advantages over the scatter-site apartment model. First and foremost, by constructing new (or rehabbing old) buildings, the stock of affordable housing increases. Developing a new building is a lucrative investment for non-profit organizations (or other landowners or investors). One of the greatest incentives to build is that the developer gets to own the property after 20 or 30 years. Thus, a property developed and paid for by taxpayers becomes privately owned.

The data on program effectiveness is mostly positive but PSH also has shortcomings. First, many PSH programs continue to require sobriety and psychiatric treatment as a condition

of admission and continued tenancy. Since most chronically homeless individuals also suffer from mental illness and addiction, PSH programs with such rules must contend with attrition and program evictions. Another operational problem with PSH is that rental vouchers belong to the agency and not the tenants. After several years of stable housing and support, tenants who no longer need on-site services must stay put because they cannot afford to move—what is referred to as "the move-on problem." Finally, development and construction for single-site PSH is a long and expensive process requiring collaboration among developers, architects, program planners, attorneys and funders.

POLICY RECOMMENDATION 3: **Improve the operation of PSH.**

▶ Increase the availability of tenant- based rental vouchers and allow for the transition from project-based to tenant-based vouchers.

▶ PSH programs should be mandated to accept individuals without requiring sobriety or participation in treatment as a precondition.

The Evidence for Housing First

There are valuable lessons to be learned from our international allies. Several European countries have ended or are about to end chronic homelessness (Aubry, Bernad, & Greenwood, 2018) and Canada has recently developed a national affordable housing strategy. In the spirit of self-evaluation given rising rates of homelessness in the U.S., shouldn't we be asking what these countries are doing to achieve such commendable results?

These countries use a Housing First (HF) approach as the cornerstone of their national policy. They also have stronger safety net programs, higher disability benefits and national health plans—and their policies are based on the belief that housing is a basic human right. Given such humanitarian values, they still needed a program model that embodied their beliefs and HF fit the bill.

HF is an effective program that ends chronic homelessness, especially for people with mental illness and/or addictions (Padgett, Henwood & Tsemberis, 2016). Results from experimental studies on its effectiveness (Aubry et al., 2015; Tsemberis, Gulcur & Nakae, 2004) served to challenge the longstanding and unwarranted assumption that psychiatric diagnoses were related to a person's skills. Further research indicated that the reasons people with mental illness became homeless were the same reasons that people without mental illness became homeless— victimized by unscrupulous landlords, skyrocketing rents, medical bills, etc. (Cohen & Thompson 1992).

Once housed, the HF program provides robust clinical and support services to meet participants' other needs (Tsemberis, 2015). A harm reduction approach plus stable housing without requiring treatment are the keys to ending homelessness for this population. And yet most homeless service providers in the U.S. still do not operate using this approach.

POLICY RECOMMENDATION 4: **All Programs Adopt a Housing First (HF) Approach.**

▶ HUD should make HF the centerpiece of homeless policy and provide the funding to support significant expansion and dissemination of the approach in the U.S.

▶ Funding for programs is tied to performance outcomes (housing availability and housing stability) and adherence to HF program fidelity

▶ Collaboration so that housing resources funded by HUD are matched with treatment and social services funded by the Department of Health and Human Services (HHS).

▶ Develop HF programs that include education and employment opportunities for other at-risk priority populations such as transition age youth, LGBTQ persons, survivors of partner violence, rural homeless persons and tribal homelessness. Examples of the latter two include HF in Vermont for rural homeless (Stefancic et al., 2013) and Indigenized HF programs with First Nations peoples in Winnipeg (Distasio et al., 2019).

▶ Maintain the current focus on chronic homelessness and veterans.

An Effective National Housing First Program: HUD-VASH. A successful national HF program in the U.S. is the collaboration between the Veterans Administration (for support services) and HUD (rental vouchers) known as HUD-VASH. Designed to serve homeless veterans who have mental health problems, HUD-VASH began in 2009 when the HUD point-in-time count revealed approximately 75,000 veterans experiencing homelessness. Authorized by Congress, HUD-VASH represented an unprecedented and extraordinary level of cooperation among federal agencies. The program has been remarkably effective in reducing homelessness among veterans by more than 55% and ending veterans' homelessness in more than 56 cities across the U.S. (https://www.usich.gov/).

Finland Ends Chronic Homeless: Housing First and Mixed Income Housing. Finland's plan to end homelessness provides an excellent example of HF taken to scale. The Y-Foundation, a Finnish national non-profit with a large endowment from public and private sources, embarked on a massive acquisition and rehabilitation program to procure single apartments as well as entire apartment buildings. Between 2016 and 2018, the number of housing units developed rose from 6,000 to 16,000 units. Homeless persons are housed in buildings alongside tenants who pay full market rent; those with clinical needs are linked to in-home case management and support services. By 2017, the number of shelter beds in Finland went from 558 to 52 and the number of chronically homeless went from 3,200 to 1,087 single adults (O'Sullivan, 2018). Of the latter, only 400 were sleeping rough. Finland's mixed income housing model is self-sustaining and provides a promising alternative to PSH (https://ysaatio.fi/en/housing-first-finland).

POLICY RECOMMENDATION 5: Use Housing First with Mixed Income Housing.

▶ Invest in building, rehabbing and acquiring hundreds or thousands of units of affordable housing.

▶ Encourage and incentivize non-profits to develop and own mixed income housing models. Profits from tenants would be re-invested to maintain and expand the real estate portfolio.

Each of these policy recommendations are building blocks of a comprehensive national strategy. The inspirational note that ending homelessness is possible is illustrated by the places where it has already been accomplished. To achieve this goal requires new policies and political will. Issues that require political will are not easily resolved. What is required for success is the creation of ever broader coalitions that share the same values and vision.

Replenishing Social Capital in the Lives of Homeless People: Overcoming Stigma through Housing and Employment

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to Abolish Homelessness

REPLENISHING SOCIAL CAPITAL

Anyone who has read Robert Putnam's classic, *Bowling Alone*, joins him in bemoaning the loss of connectedness in our society. Fewer close ties with friends, institutions, fraternal organizations, and even bowling leagues, leave us diminished in social relationships and intimate connections. And that diminishment is not ultimately relieved by the social media that we now know is contaminated by pseudo and counterfeit interactions.

Had Putnam focused the thesis of his book on the homeless people in our communities and neighborhoods, he'd have discovered another level of social disconnectedness that is unrivalled in more active acts of distancing, both on the part of homeless people themselves and by the social milieu itself. A level of social disconnection so profound that a place to live must take preeminence as the foundation of social capital, as I understand the term both from Putnam's writing and interactions with him. Take, for example, the dilemma of homeless parents when deprived of the most basic asset of social capital—a home.

HOMELESS FAMILIES

For at-risk families slipping slowly into the long misery of homelessness, research has taught us that their fall usually has multiple landing spots — grandma's, aunt's, uncle's, friend's, sister's, brother's places — before wearing out the welcome and burning out neighbors, friends, and other relationships in the nightmare they dread - the nightmare of self-doubt, imposed stereotypes, and fear of an unerasable stigma on the family.

In my many, many conversations with mothers and children, I have heard firsthand the fear of being characterized as an "unfit," "irresponsible," mother unworthy to be the ongoing parent of the children. Worse, still, for those moms is their fear of the stigma being imposed on their children in the classroom or on the playground.

In recent years, homeless children have been characterized as "hobos" in their classrooms. What mother, homeless or otherwise, would agree to any arrangement, even a resource bearing one, that leaves their child exposed to such nomenclature, that types them as "other," no matter how naïve or malicious? Not one I've ever talked to.

To the contrary, for the sake of their own self-esteem and the well-being of their children in school and on the playground, mothers eschew the "homeless" nomenclature being applied to them. Too frequently, well-intentioned case managers urge these moms to take on the unwanted label to queue them up for some resource — food, shelter, a housing voucher. A Hobson's choice for a mom wanting out of the misery and still trying to keep her family immune to the stigma.

Moms don't want the homeless appellation applied to them. They want a place to live for the security and well-being of their children.

HOMELESS INDIVIDUALS AND VETERANS

For homeless individuals, the lack of social capital and connection — a home and a job — leaves them isolated in well-intentioned programs that are focused on sustaining the program rather than on securing for the homeless person all the benefits available to them. Development teams raise money for the agency, but do less to access entitlement benefits for their customers, further depleting opportunities of self-determination while increasing dependency.

Fortunately, we are considerably better situated to reduce and end chronic and veteran homelessness than we have ever been. We are now able to implement strategies that engage our most vulnerable neighbors, place them in housing, and stabilize their tenancies with retention rates in the mid 90's.

Having focused on the issue and invested the past forty years in searching for solutions, best and next practices, and investment approaches, the good news is that we can say and back up with data:

▸ We know what to do.

▸ We know how to do it.

Our primary focus now is to **scale** those efforts to be commensurate with the magnitude of the problem.

Homelessness, as with other social and corporate and scientific advancements we've experienced in the past several decades, is subject to innovative ideas. Initiatives are needed to displace an outmoded status quo that has lingered too long in managing the crisis without responding to consumer preferences for solutions. Checking the bureaucratic boxes may satisfy the minimal requirements and the anti-fraud emphasis of government agencies, but hardly is the monitor or motivator of the change and results needed.

Thankfully, through the work of innovators and researchers both inside and outside of government, we now recognize the initiatives that move us beyond the inadequate programs of the past to a consumer-centric approach that offers homeless people what they've long wanted — the end of the long misery through the provision of a place to live, supports to sustain the place, and avenues to restore lost and forgotten social capital.

Housing First has changed the equation of homelessness in prioritizing consumer preference and investing in its tangible expression — housing units. Whether scattered site throughout the community or multi-household buildings, the provision of housing ends people's homelessness. If we've learned anything over the past several decades it is that services — even a panoply of well-intentioned, humanitarian services — without housing leaves people living on the streets or languishing in shelters. We've also learned from the abject failures of deinstitutionalization that providing housing without support services for vulnerable and disabled people sets them up for failure.

Evidence-based Housing First codifies our learning and responds to the research — housing with support services is the most important "service" offered to homeless people. Housing is the nexus point for the delivery of all other services consumers may want and need to stabilize their life in the safety and security of a place to live. And the delivery of these services is done far more effectively and efficiently in housing than when our neighbors are a moving target randomly ricocheting through multiple systems from the streets and shelters.

Some are still surprised to learn that homeless people, the customers of all our efforts, when asked, report they want a place to live . . . an apartment, a room, a flat. While there's no doubt peer reviewed research that tells us they choose housing, my own experience asking thousands of homeless people over the years for their preference provides anecdotal confirmation. Without a prompt list, simply asking what they wanted, homeless people have been clear- they never ask for a pill, a program, or a protocol, they ask for a place, a place to live.

When homeless individuals are pressed for a second preference, my experience is that a large majority indicate they want a job. Another surprising response from the customer. Years ago in Massachusetts, we learned what was entailed in wanting a "job." We had created a housing initiative targeted to people with mental illness who were homeless on the streets and in shelters, as well as those living in group homes.

We did focus groups with those placed to ensure that we were being responsive in policy and investment. After hundreds had been housed and stabilized, a new theme materialized from the consumer. They weren't waiting for the "experts." As consumers they suggested a solution, just as they had identified housing as what they wanted. The solution they suggested for their isolation was not more case managers or social works or artificial focus groups.

No, they wanted a job, employment.

As they had been with their identification of housing, they were confident in this new request. And what we learned was that this word "job" meant more than a paycheck or time-filled for them. In their self-identified isolation they understood that they needed to add some social interaction, a dose of social capital to their lives.

They instinctively knew that the antidote for this feeling of isolation and loneliness was to increase their social connectedness. In an authentic way. Not social workers or home aides paid to visit. But friends to hang out with.

That's what "job" meant to them. Oh, additionally they could pay some of the rent if they had a job. That addressed another less vocalized need they had — self-esteem. Happiest rent payers you ever saw.

The consumer is simply acknowledging the very needs we all share, homeless or housed. Homeless individuals, including homeless veterans, share in these needs and have found their voice in recent years to give expression to their preferences — a place to live and a job.

POLICY AND INVESTMENT — GOING FORWARD 2020

To sustain momentum in our national quest to reduce homelessness shaped around consumer preferences and what works, the following policy initiatives offer both immediate and long-term impact for homeless individuals, veterans, and families.

Sustain HUD-VASH. This most successful, bipartisan federal homelessness initiative offers both housing and services to veterans who are homeless. Implementation of this program for the past decade, since it was revitalized under President George W. Bush and expanded under President Barack Obama, has reduced the number of homeless veterans dramatically. Sustaining HUD-VASH offers the most vital component of a strategy that has worked in providing quantifiable outcomes. Continuing to fund HUD-VASH will bring us closer to the goal of ending the homelessness of those who have served their country.

Employment offers self-esteem, responds to consumer preference, and is cost effective as tenants are able to pay rent—it offers rent capital along with social capital.

One upgrade of HUD-VASH would be to ensure that the services provided to house the veterans be subcontracted to local community-based organizations (CBO's) who can offer specialized services, who are part of the community with access to all community resources, and who will offer services 24/7, 365 days a year. This evolution of the program will imbed the housed veteran in the larger community and enhance the recovery of social capital in their lives.

Sustain Housing First as a primary policy objective. No policy initiative from outside of government has had more impact than Housing First. Consumer-inspired and centric, cost effective, results-oriented, Housing First has become the mainstay of local policymakers for more than 15 years.

Prioritize employment initiatives targeted to homeless people. Employment has been an orphan to homeless policy for 40 years. To the extent that some community groups and agencies have responded, the result has been dead-end temporary jobs or boutique programs that are out of proportion to the magnitude of the homeless and formerly homeless populations.

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Vital to the approach is the development of a sense of scale. Employment opportunities require scaling – that is, the number of jobs targeted to homeless people needs to be on a trajectory to be commensurate with the size of the population.

Target federal housing resources to households at 30% or less of median income. Without the targeting of housing vouchers to the extremely low income, homeless people will be outside those investments. So-called affordable housing focuses on those at 50% AMI; it is occasionally, when double subsidized, extended to households at 30% AMI. Without specific targeting language, the most important antidote to homelessness will be unavailable and the numbers will grow. This targeting of the housing resource is vital in motivating developers to create housing for the poorest.

Extend mainstream housing, support and income resources to families at risk of homelessness. Preventing homelessness is not only a more cost-effective intervention for families, it is responsive to the prevention of stigma for parents and children. Intervening in the lives of at-risk families to preclude their fall into homelessness is more sensibly the work of larger, more adequately funded mainstream programs than to limited and over-subscribed homeless programs. That work begins with identifying which families are most at risk, determinants including food bank use, utility shutoffs, and eviction proceedings, among others.

Research the re-establishment of social capital in the lives of the poorest. The depletion of social capital in the lives of the poorest mirrors the loss in the general culture, only with a more devastating impact on those lives. Those with the disease of mental illness or addiction or other impairments that preclude "normal" participation in society are often confronted with social distancing, some of their own choosing, some from the world around them. Whichever the cause, that "otherness" further diminishes a "sense of belonging." Restoration of social capital is as essential as housing and employment, both of which are means of that restoration. Research that helps us understand how to restore social capital and promote a "sense of belonging" would be invaluable to the effort to end homelessness and to sustain the conditions by which homelessness would not recur.

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BIOGRAPHICAL INFORMATION

Amanda Misiko Andere has spent over fifteen years working in the nonprofit and public sector as a leader committed to racial equity, social justice, and housing affordability through advocacy for systemic change. Prior to joining Funders Together to End Homelessness as their CEO, she served as the CEO of Wider Opportunities for Women, a national advocacy organization. Currently, she serves as a board member of the United Philanthropy Forum and Co-Chair of A Way Home America, a national movement to end youth homelessness. She is also a member of the steering committee for The Campaign for Housing and Community Development Funding. Previously she served as an adjunct professor at George Mason University teaching Nonprofit Management, Executive Director of FACETS, and Vice President of Cornerstones; who have similar missions of preventing and ending homelessness and breaking the cycle of poverty.

Dennis Culhane is a professor of Social Policy at the University of Pennsylvania. His primary area of research is homelessness and assisted housing policy.

Kelly Doran MD is an emergency physician and Assistant Professor in the Ronald O. Perelman Department of Emergency Medicine and the Department of Population Health at NYU Langone Health. Dr. Doran studies how health care systems can better address homelessness and other social determinants of health. Dr. Doran attended medical school at the University of Michigan, completed a residency in emergency medicine at NYU-Bellevue, and earned a master's degree in health sciences as a RWJF Clinical Scholar at Yale University. Dr. Doran is currently conducting research on substance and homelessness among emergency department patients and on NYC's Non-Fatal Overdose Response Program.

Benjamin Henwood, PhD, LCSW is an Associate Professor and the Director of the Center for Homelessness, Housing and Health Equity Research at the University of Southern California Suzanne Dworak-Peck School of Social Work. Dr. Henwood is an expert in health and housing services research whose work connects clinical interventions with social policy. Dr. Henwood is lead author of the proposal to end homelessness that has been adopted by the American Academy of Social Work and Social Welfare as a grand challenge to orient the profession.

Beth Horwitz is the Vice President of Strategy and Innovation for All Chicago, Chicago's continuum of care, where she leads the development of a strategic roadmap and cross-system partnerships to address homelessness. Previously, she was a Senior Policy Analyst at Chapin Hall, where she co-led Chapin Hall's portfolio on ending youth homelessness. Horwitz's work has focused on building coordinated, system-level responses to homelessness. She received her master's in social work from the University of Chicago School of Social Service Administration.

Margot Kushel, MD is a Professor of Medicine at the University of California San Francisco in the Division of General Internal Medicine at Zuckerberg San Francisco General Hospital, the Director the UCSF Center for Vulnerable Populations and the Director of the UCSF Benioff Homelessness and Housing Initiative. Margot's research focuses on the causes and consequences of homelessness and housing instability, with the goal of preventing and ending homelessness, and ameliorating the effects of homelessness on health. She maintains an active clinical practice. She speaks at a local, state and national level about issues of homelessness, and frequently provides testimony to legislative bodies.

Philip Mangano is the Executive Director and CEO of the American Roundtable to Abolish Homelessness. Formerly Executive Director of the United States Interagency Council on Homelessness under President Bush (2002-2009), Mr. Mangano has received worldwide attention for his focus on what he calls the "abolition of homelessness" and for applying business planning techniques to homelessness solutions.

Dr. Matthew Morton is a Research Fellow at Chapin Hall at the University of Chicago with expertise in youth empowerment, homelessness, and evidence-based practice. He is principal investigator of Voices of Youth Count, the most comprehensive national research initiative to-date on youth homelessness in America. Morton held previous positions at the World Bank, the U.S. government, in philanthropy, and with non-profits. He was a key contributor to the development of the U.S. Government's national strategy and framework to end youth homelessness. Morton received his masters and doctorate in Evidence-Based Social Intervention and Policy Evaluation from the University of Oxford.

Brendan (Dan) O'Flaherty is a professor of economics at Columbia University. His research is in urban economics, especially homelessness, crime, and race. He serves on the board of several nonprofit organizations in Newark NJ and used to work for the city government there (long ago) including stints as aide to the mayor and acting chief financial officer. His most recent book, co-authored with Rajiv Sethi, is Shadows of Doubt: Crime, Stereotypes, and the Pursuit of Justice (Harvard University Press, 2019).

Dr. Deborah K. Padgett is a professor at the Silver School of Social Work at New York University. She is first author of a book on Housing First (HF) published by Oxford University Press (2016) with co-authors Benjamin Henwood and Sam Tsemberis. Entitled "Housing First: Ending Homelessness, Transforming Systems and Changing Lives", the book describes the history of HF and its widespread adoption internationally following rigorous research evaluations. Dr. Padgett has published on homelessness and has received NIMH funding for qualitative studies of HF. She is co-lead with Ben Henwood on the Grand Challenge to End Homelessness.

Nan Roman is President and CEO of the National Alliance to End Homelessness, a public education, advocacy, and capacity-building organization. She is a leading national voice on the issue of homelessness and works closely with members of Congress and the Administration, state and local officials, nonprofits and consumers to identify and advance solutions to the problem. Her unique perspective on homelessness and its solutions comes from extensive local and national experience in the areas of housing, poverty, and community-based organizations.

Marybeth Shinn, PhD, is a Cornelius Vanderbilt professor at Vanderbilt University. She co-led the Family Options Study of different approaches to ending family homelessness, evaluated the initial study of the Pathways Housing First experiment, and developed a model used by New York City to target its homelessness prevention services. With Jill Khadduri, she authored *In the midst of plenty: Homelessness and what to do about it.* Wiley, forthcoming February, 2020.

Jill Khadduri, PhD, is a principal associate and senior fellow at Abt Associates. She co-leads the Annual Homeless Assessment Report (AHAR), has played leading roles in several important studies of both homelessness and housing policy for two decades, and served as Director of the Policy Development Division of the Department of Housing and Urban Development. With Marybeth Shinn, she authored *In the midst of plenty: Homelessness and what to do about it.* Wiley, forthcoming February, 2020.

Dan Treglia is a Post-Doctoral Fellow at the University of Pennsylvania's School of Social Policy and Practice who uses quantitative methods to address a range of social policy issues—most notably homelessness—with a clear focus on policy and programmatic implications. Dr. Treglia served as Deputy Director of Research at New York City's Department of Homeless Services (DHS) and led the City's effort to estimate its unsheltered homeless population. He continues to consult for DHS and also works with New York City's Center for Innovation through Data Intelligence (CIDI) to assess predictors of hospital use among homeless adults.

Jack Tsai, PhD is Director of Research for the VA National Center on Homelessness Among Veterans and Associate Professor of Psychiatry at Yale School of Medicine where he is also Director of the Division of Mental Health Services Research. Dr. Tsai has served on the Yale faculty since 2010 and received federally funded grants and published over 170 peer-reviewed articles on topics related to homelessness, severe mental illness, trauma, and health disparities. He holds leadership positions in the American Psychological Association and the American Public Health Association, and serves as Editor-in-Chief of the Journal of Social Distress and the Homeless. He teaches and supervises interns, residents, and fellows in the VA, Yale, and surrounding universities.

Dr. Sam Tsemberis, a clinical psychologist, developed the Housing First approach (HF) that has been adopted in the U.S. Canada and Western Europe. He founded Pathways to Housing agencies first in New York City in 1992 and then in Washington DC, Philadelphia PA, and Burlington Vermont. Dr. Tsemberis currently serves as the CEO of the Pathways Housing First Institute and also serves as the ED for the Greater Los Angeles VA-UCLA Center of Excellence for Training and Research on Veterans Homelessness and Recovery.

Diane Yentel is the President and CEO of the National Low Income Housing Coalition, a membership organization dedicated solely to achieving socially just public policy that ensures people with the lowest incomes in the United States have affordable and decent homes. Diane is a policy expert and advocate with nearly two decades of experience on affordable housing and community development issues. Among other roles, she previously served as Vice President of Public Policy and Government Affairs at Enterprise Community Partners and Director of the Public Housing Management and Occupancy Division at the US Department of Housing and Urban Development.

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