

STATEMENT FOR THE RECORD

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Chairman Allard, Ranking Member Reed, and Distinguished Members of the Committee:

The Committee is to be commended for the proposed bill reauthorizing of the McKinney-Vento Act. As you are aware, tremendous strides have been made in recent years, through both the appropriations process and HUD's competition in orienting the McKinney-Vento programs toward meeting the goal of reducing homelessness through the creation of permanent housing opportunities. Many thoughtful changes have been made to these programs which have collectively moved communities away from mere expansions in providing services to people in a state of homelessness, and toward a goal of reducing the number of people who experience homelessness. The bill under consideration is a significant milestone in meeting the nation's obligations to the poorest and neediest among us.

I am particularly supportive of the bill's codifying into law the emphasis of using the McKinney-Vento programs to advance efforts to end chronic homelessness among single adults with disabilities. Research on the dynamics of homelessness among single adults has consistently shown that people experiencing chronic homelessness are costly users of emergency shelter, and costly users of acute care systems in health, public safety, and corrections. While adults who become chronically homeless may represent only 15% of adult shelter users over time, research indicates that they occupy more than half of the emergency shelter beds for adults in our cities, and account for a substantial majority of the people who live – and in some cases die – on our streets and in other public spaces.

Research has further shown that investments in supportive housing targeted to this population in many cases can be fully offset by the reduced use of shelters, hospitals, emergency rooms, and jails. In the face of such evidence, it is difficult to justify a policy that spends so many resources essentially maintaining people in a state of homelessness, when those same resources can be leveraged for a solution to their plight. The bill's provision for setting aside 30% of the McKinney-Vento resources for permanent housing programs for people who are chronically homeless makes moral and economic sense in

light of these data, and the Committee is to be commended for requiring that communities continue to target significant Federal resources for this purpose.

I have just a couple of concerns with the nature of the targeting suggested in the bill. The bill should include a requirement that adults who are chronically homeless also have to have a disability in order to qualify for the set-aside resources. Previous federal efforts in this area, including priorities established through the appropriations process and HUD's competition, have included a disability eligibility criterion for homeless adults. This targeting is based on the fact that the evidence of cost-effectiveness is strongest for people with disabilities, and because research suggests that nearly all adults who experience chronic homelessness also have a disability. Without this further criterion, the bill could unintentionally encourage lengthy shelter stays alone as a means of accessing this limited housing benefit.

My second concern centers on the inclusion of "chronically" homeless families in the eligible population for permanent supportive housing funded through this legislation. I am not aware of a research literature on family homelessness that supports the designation of "chronicity" among homeless families. Indeed, there are families who are homeless for long periods of time, and that is an issue deserving of redress. But it is not at all clear that long-term homelessness among families is best understood through a theoretical framework that was primarily intended to characterize a population of single adults who are so disabled and disenfranchised that – were it not for emergency shelter or supportive housing programs – they would live and even die on the streets. Without a doubt there are families among the homeless who have special needs, and who have disabled members, but segmenting this population from the larger population of homeless and near-homeless families, as is done in the proposed bill, could have unintended and long-term negative consequences, for both homeless families and the chronic homeless adult population.

Research on family homelessness has not found that homeless families in general are significantly different from other poor families. This is not surprising, given that we now know that homelessness among families is fairly common – 10% of poor children will experience homelessness each year, with a rate that is certainly much higher (perhaps twice as high) among families from disadvantage minorities, such as African Americans. The extent of family homelessness, and its disruptive impact on children and their educations – irrespective of whether they are from a family with a disabled family member – cries out for a broader and more substantive policy solution than can be found within the very limited resource represented by the 30% set-aside of McKinney-Vento spending.

Research has found that homeless families nearly universally respond positively to the receipt of rental assistance. Despite the many challenges a given family may face, nearly all homeless families end their homelessness, and do not recur into homelessness with the support of rental assistance. Current research in which I am engaged indicates that long-stay families reside in shelters for an average of nine months, at a cost of approximately \$22,000 per family in Philadelphia. The same resource that provides nine

months in a shelter could provide those same families with the equivalent of *three years* of federal housing assistance through the Section 8 program. Even the majority of families who's average stay in shelters is less than two months consume nearly \$4,000 in emergency shelter resources, resources that could be much better spent providing families with an expedited exit out of homelessness and into housing.

In many small and even quite substantial program and policy experiments around the country, communities are exploring the value of such "Housing First" programs as an alternative to shelter among homeless families (as well as singles). These programs embody the principle that no family should be chronically homeless, and, indeed, no family should be homeless for more than a brief period of time (i.e. 30 days). To the extent that this Committee can do so, it should seek to encourage communities to explore how they can use these current resources, as well as their TANF programs and other federal and local resources, to relocate families presenting as homeless as soon as possible, either through emergency relocation grants, or transitional rental assistance.

The subsegment of families who need additional support services to maintain their housing, could and should receive those support services from mainstream child welfare and behavioral health systems. To the extent that permanent supportive housing is identified as necessary to prevent recurrent or long-term homelessness among some families, communities should be encouraged to convert their existing transitional housing programs --- most of which are currently not targeted to families with special needs -- to this purpose. In their current untargeted form, transitional housing programs have not provided a demonstrated benefit associated with their lengthy stays and high costs. In many communities, those units represent a significant resource that could be put to this purpose. And for those families in need of more sustained rental assistance without services, it is imperative that our federal housing programs expand to meet that need.

The 30 percent set aside is not going to be sufficient for accomplishing any of these goals. Moreover, without any strict limits on the use of this set aside for families, we may well undermine the primary consensus principle that this legislation seeks to codify -- the reduction of chronic homelessness among single adults through the targeting of permanent supportive housing resources.

The proposed bill also makes some significant progress in codifying into law some mechanisms for accountability that had been lacking in previous legislation for homeless programs. The provisions for supporting Homeless Services Management Information Systems, or HMIS, promises to give local communities, as well as states and the Federal government, increased information to make informed policy decisions. Sound data collection can yield important information for governments and other planning bodies as they attempt to steer their systems toward reducing homelessness, either through housing placement or prevention.

As the bill acknowledges, in addition to ending chronic homelessness, preventing future homelessness is going to be a critical objective to achieving the goal of reduced homelessness. Research suggests that as many as half of the single adults entering public

shelters have recently exited other public systems of care. The HMIS data can be used to hold these mainstream systems accountable for the number of people they are sending to homelessness, and who in turn get sent back to these institutions. As long as we operate without data, this revolving door is invisible to these institutions, who choose to recognize the problem only when it appears inside their corridors. This is true whether it is acute hospitalization, detoxification, or correctional systems. HMIS can and should hold a mirror to these systems so that they can measure and reduce the traffic through these revolving doors. Doing so will require that local and state governments use their data effectively. The McKinney-Vento legislation could encourage states and localities to engage in systematic data analysis to identify how institutional discharges are contributing to homelessness, and, in turn, resulting in further reinstitutionalization and homelessness.

In further support of such collaborations, I encourage the bill's support of the 10-year plans to end homelessness that have become commonplace around the country. Many of these plans are the result of new and potentially powerful collaborations among local and state governments, as well as service providers and less traditional stakeholders in these communities. These partnerships are essential to advancing a local agenda, and for leveraging the multi-agency and multi-sectoral resources that will be necessary to develop and support housing, as well as programs for prevention and diversion from shelter. These partnerships are a reflection of the collaboration that has also been embodied in the US Interagency Council on Homelessness, which has brought together many federal partners for this purpose and brought new resources from other federal programs to this population. Indeed, it is to the credit of the US Interagency Council on Homelessness that the current national conversation has changed, and has now focused a variety of agencies at all levels of government on the objective of reducing and ultimately ending homelessness in our country.

If the bill could learn from our previous experience with the Continuum of Care, it would be to assure that local governments have a majority position in the local planning boards called for in the legislation. Local governments control most of the policy levers that are required to develop and support housing, and to deliver social services and prevention. Only government has the legal authority and the public accountability that is necessary to achieve public aims. Therefore, local governments should be assured through their representation on local planning boards that their efforts can work in a common direction with the intended use of federal and state resources.

Much progress has been made on behalf of people who are homeless or threatened with homelessness. However, the problem remains a stubborn fixture in our communities. Federal resources can and should help in redirecting homelessness policies away from maintaining or even enhancing a makeshift private welfare system. Instead, our goal should be to strengthen the capacity of our social welfare system to protect people from homelessness in the first instance, and to prevent unnecessarily long shelter stays in the second. Chronic street homelessness should be addressed directly with housing programs that provide a solution to homelessness. This bill, properly modified, can make substantial progress in committing our nation to these goals, and in pushing us

even further in expanding access to housing and services that will truly prevent homelessness and away from the institutionalization of this unacceptable and unnecessary social ill.

Thank you. I look forward to answering any questions you may have.