

Housing and Homelessness

Summary of Recommendations:

- **Reauthorize and appropriate \$3 billion for McKinney-Vento Homeless Assistance** programs within the Department of Housing and Urban Development (HUD) through the HEARTH Bill (H.R. 840)
- **Align the HUD definition of homelessness with other Federal definitions** to include people sharing the housing of others due to loss of housing, economic hardship, or a similar reason, and to people living in hotels or motels due to lack of adequate alternatives
- **Establish a National Housing Trust Fund** to build, preserve, and rehabilitate 1.5 million units of housing affordable to low-income people over the next ten years
- **Preserve and increase current publicly assisted housing.** Fund all Section 8 housing vouchers currently in use, and provide additional funding for a minimum of 150,000 new vouchers
- **Restore the requirement for a one-to-one replacement of low-income housing units** to increase the availability of affordable housing
- **Emphasize “housing first” and “permanent supportive housing” interventions** to provide our most vulnerable neighbors with secure housing and sufficient supportive services
- **Fund renewals of the Shelter Plus Care and Supportive Housing Programs** from HUD’s Housing Certificate Fund
- **Support public and private initiatives that keep people from becoming homeless**
- **Assure that targeted services funded by HUD are maintained** as HUD support is withdrawn

Affordable housing shortages serve as the major barrier to the elimination of homelessness.

Between 1976 and 1983, HUD budget authority shrank from \$83 billion to \$18 billion (in 2004 constant dollars), and has languished below \$35 billion since. The result: in 1976, HUD built or maintained over 400,000 units of affordable housing; in 2002, there were a meager 25,900 existing units, and HUD added only 7,635. Drastic Federal disinvestment in affordable housing has unsurprisingly led to a greater number of low-income households that experience housing problems. More than 60% of extremely low-income households spend more than 30% of their income on housing¹ – exceeding HUD’s affordability standard – and 3.5 million people experience homelessness each year – the most visible and vicious symptom of our affordable housing crisis.

The cost of housing is increasingly out of reach. While the Federal minimum wage has risen only nominally since 1997, housing costs have significantly increased across the nation. Currently, there is no jurisdiction in the U.S. where a minimum wage worker can afford even a one-bedroom apartment at fair market rent. A person working full time must earn an hourly wage of \$16.31 to rent an average two-bedroom apartment.² As the subprime mortgage crisis forces moderate-income households to lower-cost rental housing, the poor find themselves increasingly squeezed out. The widening gap between housing cost and income puts millions of people at risk of losing their homes and facing life on the street or in shelters.

Housing is health care. Homelessness causes medical problems, greatly exacerbates existing illness, and seriously complicates treatment. People without homes are exposed to the elements, the violence of the streets, diseases that are rampant in overcrowded shelters, and the debilitating effects of poor diet and lack of rest. A person experiencing homelessness is 3 to 4 times more likely to die than their housed counterparts.³ Indeed, stable, sanitary housing is central to effective health care. Mounting evidence suggests that housing status is itself a stronger predictor of HIV risk and health outcomes than individual characteristics.⁴ Local, State, and Federal leaders must target housing assistance to people experiencing

¹ “Without Housing: Decades of Federal Housing Cutbacks Massive Homelessness and Policy Failures.” *Western Regional Advocacy Project*. Nov 2006. http://www.wraphome.org/wh_press_kit/Without_Housing_20061114.pdf

² “Out of Reach 2007-2008.” *National Low Income Housing Coalition*. Dec 2007. <http://www.nlihc.org/oor/oor2008/>

³ O’Connell, James. *Premature Mortality in Homeless Populations: A Review of the Literature*. December 2005. <http://www.nhchc.org/PrematureMortalityFinal.pdf>

⁴ Aidala, Angela, Columbia University. “Risky Persons vs. Risky Contexts – Housing as a Structural Factor Affecting HIV Prevention and HIV Care.” Second National Housing and HIV/AIDS Research Summit, 2006.

homelessness, assist those with the greatest housing needs, and change the housing policies that reduce the supply of affordable housing and produce homelessness.

Recommendations

1. **Reauthorize and appropriate \$3 billion for HUD's McKinney-Vento Homeless Assistance programs through the HEARTH bill (H.R. 840).** This legislation incorporates an inclusive definition of homelessness (see recommendation #2); would provide a full range of services, including homeless prevention activities, for individuals and families at risk of becoming homeless; and would continue to fund the continuum of care necessary to ameliorate homelessness.
2. **Align HUD's definition of homelessness with other Federal definitions.** Federal agencies administering targeted homeless assistance programs utilize diverse definitions of homelessness reflecting differing agency missions and authorizing legislation. As a result, extremely vulnerable people assisted by one Federal program are sometimes prevented from receiving needed services provided by another. For example, families and youth who "double up" due to economic hardship or loss of housing are served by HCH projects but excluded from HUD homeless programs. In order to foster interagency collaboration, HUD's definition of homelessness must be broadened to a common, comprehensive Federal definition that includes people sharing the housing of others (due to loss of housing, economic hardship, or a similar reason), and people living in motels, hotels, or campgrounds due to lack of adequate alternatives.
3. **Establish a National Housing Trust Fund** to build, preserve, and rehabilitate 1.5 million units of housing affordable to low-income people over the next ten years. The National Housing Trust Fund Campaign (www.nhtf.org) is working for the passage of Federal legislation to alleviate the severe shortage of affordable housing for low-income people and extremely low-income people. (See the Council's policy statement on Affordable Housing and Homelessness.)
4. **Preserve and increase current publicly assisted housing.** Fund all Section 8 housing vouchers currently in use and provide additional funding for a minimum of 150,000 new vouchers per year as necessary. Congress also must restore the requirement that local authorities give preference to people experiencing homelessness when granting public housing assistance.
5. **Restore the requirement for a one-to-one replacement of low-income housing units** to reverse the decreased availability of affordable housing. Many states and cities, with Federal support, are replacing outdated public housing units and unsightly high-rise buildings with more attractive and community-oriented buildings. These new developments are usually mixed-income with only a fraction of the new units dedicated to low-income individuals and families. This reduction in the affordable public housing stock only increases the incidence of homelessness; cities and states must strictly prohibit the loss of public housing units. Necessary public housing renovation should provide for replacement of low-income units – onsite or in the neighborhood – on at least a one-to-one ratio, and planning for renovations must always involve the residents affected.
6. **Emphasize "housing first" and "permanent supportive housing" interventions** to provide our most vulnerable neighbors with secure housing and sufficient supportive services. "Housing first" approaches are characterized by barrier-free access to permanent housing directly from shelters or the streets with no pre-requisite to achieve sobriety or attain a level of stability before housing is offered. The "housing first" model differs from "housing readiness" models of supportive housing which require individuals with behavioral health problems to receive substance abuse treatment or mental health services as a condition of tenancy. The model is proving effective in projects throughout the country. In order for supportive housing to be successful, there is a need for adequate funding for flexible and integrated supportive services and high-quality property management.⁵

⁵ Post, Patricia. *Defining and Funding the Support in Permanent Supportive Housing: Recommendations of Health Centers Serving Homeless People*. National Health Care for the Homeless Council, prepared for the Corporation of Supportive Housing, 2008. <http://www.nhchc.org/PSHReport.pdf>

7. **Fund renewals of the Shelter Plus Care and Supportive Housing Programs from HUD's Housing Certificate Fund.** Homeless program resources must remain available for new housing and other supportive services for people who remain homeless. These programs combine rent subsidies with intensive support services and treatment, including mental health assistance, substance use counseling, employment training, and a range of other supportive services that keep people housed while they build the skills to live as independently as possible.
8. **Support public and private initiatives that keep people from becoming homeless.** We urge policy makers to support regulatory mechanisms such as rent control and vacancy decontrol to shield tenants against the market forces that cause displacement. Laws that protect tenants from unfair evictions and high rent increases should be enacted or restored. Further, we urge public officials to pursue initiatives to protect low-income housing against "gentrification" and to support tenant organizing by enforcing the laws that protect tenants against harassment or threat of eviction for joining a tenant association. Because there is not enough public housing to meet current needs, we urge the creation of more "socially owned" housing, such as limited equity cooperatives and condominiums, where buildings are collectively owned by their residents and remain affordable to future owners. Local communities should expand nonprofit ownership alternatives, such as community development corporations that own and develop non-speculative, permanently affordable housing. It is time for policy makers to treat housing as a right rather than merely a business venture.
9. **Assure that targeted services funded by HUD and HHS are maintained as HUD support is withdrawn.** Supportive services must be overseen by an agency with expertise in the coordination of comprehensive physical and behavioral health care for people experiencing homelessness, such as the Department of Health and Human Services. Targeted supportive services must be funded with new dollars, not by diminishing already-strained service programs, and the Congress should require that HUD maintain current levels of funding for homeless services until new funding is established.