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Justice Talking Radio Transcript

Can We End Homelessness in 10 Years?—Air Date: 4/23/07

President Bush has made a commitment to end chronic homelessness in ten years. Many cities around the country have also taken on this goal. But is it really possible? And what's the best way to do it? This week on Justice Talking, we'll look at who the homeless are in America. We'll talk about the effects of homelessness on children, the challenges of providing health care to the homeless and the merits of a program called Housing First, which puts chronically homeless people into apartments.

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MARGOT ADLER: This is Justice Talking from the University of Pennsylvania's Annenberg Public Policy Center. I'm Margot Adler.

There are several hundred thousand homeless people in America today. They double-up in crowded apartments with friends, families, neighbors. Some depend on emergency shelters and others sleep on the street. We visited one Philadelphia shelter called My Brother's House, which serves the chronically homeless. The men that stay at My Brother's House have been homeless for years, some for decades. The center provides them with basic needs: a safe place to sleep, a change of clothes, and three meals a day. Up to 20 men live at My Brother's House at any given moment. Here's what some of the current residents have to say about their experiences with homelessness.

RICHARD: My name is Richard. I'm from, originally from, here in Philadelphia. I was never homeless before I left Philly, but I left, went traveling, and ended up homeless while I was traveling and adapted, sleeping on the street, subway when it was cold.

UNIDENTIFIED MALE: First two or three years I tried some of the shelters and I didn't like them.

UNIDENTIFIED MALE: I'd rather sleep on the streets than go through the hassle. May be cold, may be wet, but, yes sir, at least I have a peace of mind.

UNIDENTIFIED MALE: Oh, I've been homeless since 2002. I'm unemployed at the time, looking for work. At the last position I held I was employed for four months and on that four-month-stretch I was out, had my own place. But I became unemployed and from there that's about it. I have certain goals I have to meet before I can, say, end this homeless cycle. But I'm willing and I have to get help with my drug and alcohol problem. Once I clear that up I can move on forward.

UNIDENTIFIED MALE: I was homeless for like six or seven years in the streets, you know, because of my drug addiction. Sleeping in old houses, I would put paper around the floor because I know rats were staying there. That way, I could hear them. That's another thing: When you're homeless you've got a lot of young people, they badger you. They might throw bottles at you, you know. By me, when I was homeless, it was when it was hot and you couldn't get water. You had some people bring you water. But sometimes you wanted to get some water and you go into one of these like McDonald's or something, you ask them for water and they just look at you different. It's just a lot of things has happened in my life, right, that I thought when I was out there being homeless and on drugs I thought it would never happen.

MARGOT ADLER: That last voice you heard was Ahmed. He was homeless for almost seven years. Today he is a staff member at the shelter. He rents his own apartment and has reconnected with his teenage son.

MARGOT ADLER: While homelessness existed before the 1980s, it wasn't until then that it became a major problem affecting hundreds of thousands of people. Nan Roman joins me now to talk about why homelessness became a crisis in our country. She's the president of the National Alliance to End Homelessness, a public education and advocacy group in Washington, D.C. Nan Roman, welcome to Justice Talking.

NAN ROMAN: Thank you.

MARGOT ADLER: What happened in the 1980s that made homelessness a national issue?

NAN ROMAN: Well what happened in the '80s, really beginning in the '70s, is that we started to lose our supply of affordable housing. And today there are about 5.4 million fewer affordable housing units than there are households who need them. And that's what's changed between now and the late '70s.

MARGOT ADLER: When I think about homelessness I think about sort of a number of different issues coming together: lack of affordable housing and gentrification on one hand, also de-institutionalization of mental patients, some of the drug issues that came up. Am I wrong to think of this as multiple issues?

NAN ROMAN: There are multiple issues that have contributed to the problem. I would say affordable housing is the major issue but there were other things that happened in the '80s that I think were important to it, as you mentioned. The AIDS epidemic arose in the '80s. I think that was a contributor. Crack cocaine and the effects of that also happened in the '80s. The de-institutionalization issue, people exiting mental hospitals, was mostly in the '60s and '70s but its impact really started to be felt in the '80s when it was combined with the lack of affordable housing.

MARGOT ADLER: Give me a picture of the homeless: who they are, you know, women, families, men, mentally ill, addicts, you know. Paint a picture of who we're talking about.

NAN ROMAN: The most recent data says that there are about 750,000 people who are homeless at a single point in time. That's based on 2005 data. Of those people, about 45 percent are not being sheltered. The rest are in some kind of sheltered situation. About 41 percent of those people are living in families and about 60 percent are individuals, living alone. And about 23 percent of those people are chronically homeless. That is, they're homeless for long periods of time.

MARGOT ADLER: One of the things that I learned in covering the homeless is that one of the stereotypes that I think we have is that we assume that the homeless don't have jobs. But a certain percentage of them are working. True?

NAN ROMAN: There are a lot of homeless people who are working, are working part time, or have worked recently. But again, they're not making enough money to pay for housing, and once people are homeless it's very difficult for them to maintain employment sufficient to pay for housing. You know, to get to work on time or to maintain consistent employment, to do well in employment. Housing is kind of an undergirding necessity for people to do well in their jobs.

MARGOT ADLER: Why are there such discrepancies in the numbers? When I was reading to prepare for this I heard figures that ranged from the one you gave, 750,000, to 3.5 million.

NAN ROMAN: Well, the 750,000 number is a point-in-time number. It's how many people are homeless on a given night more or less. There are somewhere between two and a half and three and a half million people who are homeless every year. That number, which is probably the more revealing one, is about somewhere between one and two percent of the total population of the country will experience homelessness at least once in a year. Ten percent of poor people will experience homelessness at least once in a year.

MARGOT ADLER: Nan Roman is the president of the National Alliance to End Homelessness, a public education and advocacy group in Washington, D.C. Thank you for coming on Justice Talking.

NAN ROMAN: Thank you so much for having me.

MARGOT ADLER: Communities around the country have been on the front lines dealing with homelessness since the 1980s but the federal government only began to play a role in 1987, when it established the Interagency Council on Homelessness. The council provides federal leadership in assisting homeless families and individuals. Philip Mangano is its executive director. He and the Bush administration have championed 10-year plans for ending homelessness. There are now 300 jurisdictions around the country that have plans to end chronic homelessness in a decade.

PHILIP MANGANO: This is the first time in the history--certainly the most contemporary response to homelessness for the last 30 years or so--that every level of government and the private sector, and the homeless consumer--it's the first time that literally there's a partnership that extends from the White House to the street, all of us now partnered through local 10-year plans and some state 10-year plans, all on the same page of strategy to get the job done for homeless people.

MARGOT ADLER: Now you're very well regarded by many homeless advocates. What do you think you're doing that's so different from your predecessors?

PHILIP MANGANO: I think we've taken a business frame and applied it to the issue of homelessness. I think historically we've spent a lot of time managing people's homelessness, maintaining the efforts that we were making, but accommodating the disgrace. So moving from simply servicing homeless people to solving their homelessness I think has been a big part of the kind of commitment, the unprecedented political will in cities and states and counties around our country. I think that's one of the elements that's really captured the imagination of governors and mayors who have been for 20 years and more frustrated that everything they attempted to do wouldn't bring the result that they wanted to see. Finally as a result of implementing results-oriented business-frame 10-year plans, they're seeing the result that they look for. And in more than 25 cities across our country, large and small, for the first time in over two decades we're seeing a reduction in the number of people on our streets, a reduction of people long-term in the shelters.

MARGOT ADLER: Why a 10-year plan? What was the thinking behind that?

PHILIP MANGANO: Well, you know, it's interesting when we said 10-year plan some people said we can do it in a year or two. Other people said it's naïve and foolish to think that you could get this overcome in 10 years. I think our approach was here's a significant social problem. Was it reasonable to think that we could get it done in a year or two, something that's been going on for nearly a quarter of a century? We knew a timeframe would result in both political will and also give a certain urgency to the response. And again the response is to move from managing to ending.

MARGOT ADLER: Do you think that housing is a right?

PHILIP MANGANO: I think that there was a promise in our country that was implicit in everything that's happened since the revolution. And that promise is that people would have a place to live. The very seal of the United States Interagency Council on Homelessness, which

we developed when the president revitalized the council, in that seal there's a banner over the head of the eagle. The banner was blank and we thought we'll put there in that banner what the intent, what the motivation is of the United States Interagency Council. So I called some of my friends at Harvard because I wanted to have gravitas. I wanted it to be in Latin. So they gave me the Latin phrase and it was Domicilia Omnibus Americanus.

MARGOT ADLER: A house for all Americans? Or housing for all Americans?

PHILIP MANGANO: Yeah, exactly. A home for every American.

MARGOT ADLER: Philip Mangano is the executive director of the United States Interagency Council on Homelessness. Thank you for talking with me.

PHILIP MANGANO: Thank you. You're very kind.

MARGOT ADLER: To learn more about our guests and about homelessness in our country, go to our website, justicetalking.org. You can also download the show if you want to hear something again or if you miss part of the show.

MARGOT ADLER: Coming up on Justice Talking:

UNIDENTIFIED MALE: The first thing we ought to work on are these issues of domestic violence and a parent who has to be able to pay those bills later on. Once you move to housing, who's going to pay for it? Are we going to make these people dependent and subsidize their housing for the rest of their lives?

UNIDENTIFIED MALE: You know, the common enemy of homeless people is the shelter system. You know, it's the poorhouse of our time. And people fear going to the shelter system. It's an unnatural environment. Children and parents should be able to have a normal family relationship in their own dwelling.

MARGOT ADLER: Is the best way to end homelessness to simply give people a home? Stay with us.

MARGOT ADLER: This is Justice Talking. I'm Margot Adler. A new federal approach to ending homelessness is showing some promising results. It's called Housing First and it moves chronically homeless people more rapidly from an emergency shelter to a permanent home with support services. From Boston, Monica Brady-Myerov reports.

MONICA BRADY-MYEROV: The Housing First model works well for people like Karen.

KAREN: I'm a rule breaker. I don't like rules. He'll tell you I was a hell-raiser. It was like I didn't respect the rules. I didn't care.

MONICA BRADY-MYEROV: Karen, who didn't want to use her real name, has been homeless for eight years. Her disruptive behavior often got her kicked out of shelters. Now she has her own room at a women's rooming house in Quincy, a city suburb of Boston. The group of apartments are managed by a homeless shelter. And she's largely left alone.

KAREN: I mean, it's freedom. It's like, your life is your own here. We can come and go as we please. We don't have anybody saying okay you have to be in by 10 o'clock, because I wouldn't go for that. I wouldn't go for that at all.

MONICA BRADY-MYEROV: Karen is part of a pilot program that's turning the traditional model of how to provide services to homeless people on its head. Housing First takes chronically homeless people, those who have been without a home for a year or more, and gives them subsidized housing first. The housing is permanent. Staff visit the apartments to provide support services such as counseling for substance abuse or mental illness. In Karen's case it's a drug addiction. And when she slipped up and used drugs she did not lose her housing like she would've at a shelter.

UNIDENTIFIED MALE: We're going to the women's shelter dorm.

MONICA BRADY-MYEROV: This is where Karen used to live. John Yaswinski, a homeless advocate who runs two Housing First programs and an emergency shelter, gets buzzed through security into the women's emergency shelter. The room is largely empty because women have to take their belongings with them every day and line up at 4 p.m. to get a bed for the night.

JOHN YASWINSKI: As you can see it's one bed, one small area, and that's all their belongings. That's all they're allowed to have in this type of shelter environment. It's two bags, their whole life in kind of one small space.

MONICA BRADY-MYEROV: Now Karen has keys to her own apartment that's on a quiet side street. She can come and go as she pleases. The city of Quincy has created 44 units for Housing First clients. In the first year more than 90 percent of the people housed are thriving in their new independent environment even though for years many of these same people slept outside and carried their belongings in grocery bags. As a result, Yaswinski says he's cut the number of emergency shelter beds in half and the program is saving the city money.

JOHN YASWINSKI: It's kept the women that had been here for the longest period of time, women that had been here for three, four, five, up to 10 years, in and out of the streets, in and out of the emergency rooms, in and out of this emergency shelter, out of the expensive system of care, out of the emergency shelter. So it's allowed us to continue to serve new people, sad to say, but move them on more quickly.

MONICA BRADY-MYEROV: The savings is also realized in fewer police calls, a decreased need for ambulances and emergency room visits, and a reduction in jail use. The Federal Council on Homelessness has helped more than 100 cities around the country adopt Housing First. The model is credited with reducing the chronic homeless population in San Francisco, Chicago, and New York City.

Joe Finn is the executive director of the Massachusetts Housing and Shelter Alliance.

JOE FINN: This is just not another model amongst models as much as it is a systems change in that it represents a sea change in how we approach homelessness and that the ultimate end objective is to end the state's reliance on emergency shelters.

MONICA BRADY-MYEROV: The biggest savings for cities is in healthcare says Dr. Jim O'Connell with Boston Healthcare for the Homeless. Having a permanent home has improved the health of his homeless patients.

JIM O'CONNELL: I remember back in 1985 thinking that it would be really cool if on one of my Mass General scripts I could write in addition to penicillin for pneumonia or infection, I could also write one studio apartment, use as directed, 30 days, refillable for six months or something like that. It would make as much sense I think as the other treatment.

MONICA BRADY-MYEROV: In a study, Boston Healthcare for the Homeless found that people who sleep outside have an average healthcare cost of \$28,000 a person a year. Once those same people have permanent housing, their healthcare costs drop to \$6,000 a year in part because they had fewer hospitalizations and visited the emergency room less frequently. Some homeless advocates express concern that funding permanent housing will mean less money for emergency shelter beds.

Nancy Schwoyer, who runs Wellspring House, a family shelter north of Boston, says there will always be a need for temporary emergency beds.

NANCY SCHWOYER: I really believe that most advocates of not doing away with the shelter industry first is sincerely because the last census shows that homelessness is not, among families, is not decreasing. It's increasing. And I think that really scares people that we will kind of shut down the shelters before we have the resources that we need to get people in housing.

MONICA BRADY-MYEROV: Advocates for the Housing First model say it isn't designed to eliminate the need for emergency shelters. But it's a recognition that the current system of shelters isn't ending homelessness. For people like Karen, the Housing First model is her best hope for staying out of shelters and off the street.

KAREN: For right now this is the best place for me because it's safe. It's better than the street. It's 100 percent better than sleeping outside in the cold.

MONICA BRADY-MYEROV: For Justice Talking, I'm Monica Brady-Myerov.

MARGOT ADLER: While we've just heard about a program that's getting significant support from the federal government, some people think Housing First is the wrong approach to ending homelessness, especially when it comes to homeless families. Ralph Nunez is one of them. He's the president and CEO of Homes for the Homeless, a nonprofit organization in New York City, which provides transitional housing for homeless families. Dennis Culhane is not only a proponent of the idea of providing housing first but it's his research that has led to the development of the strategy. He's a professor of social welfare policy at the University of Pennsylvania. He studies homelessness and housing policy.

Ralph Nunez, Dennis Culhane, welcome both of you to Justice Talking.

DENNIS CULHANE: Thank you.

RALPH NUNEZ: Thank you.

MARGOT ADLER: Ralph, you run a transitional housing program. Tell us how it works.

RALPH NUNEZ: Well we house on any one day over 600 families and they're in residence with us. They're usually with us up to a year. Some are with us longer than that and some are shorter. And the kind of facility we run isn't just temporary shelter. We see this issue as really a poverty issue and so we tend to deal with all of the problems that we see in the families. So what we try to do is turn a family around, try to bring them up higher out of poverty, so that when they move to housing they can permanently stay there.

MARGOT ADLER: You've described the housing complexes that you run as communities of opportunity. What does that mean?

RALPH NUNEZ: Well, what we think is that this is an opportunity to deal with poverty. These facilities have really become the frontline of the war on poverty these days. These are the poorest of the poor families. And so we think that this is a community for them because you will find on-site here a health clinic; you will find a daycare for children that they haven't had in the community; after-school programs so that they can get their homework done, at work in science and math; you'll find also work programs for the parents so that they can start to learn how to work, licensed alternative high schools for the parents so that they can start to finish their education. These have become communities. Where before you lived in a poor community and you had to go across town for these services. We have found that you can be very effective with the population because it's all under one roof. It's a new way to deliver these services.

MARGOT ADLER: Dennis, you've been researching homelessness for more than 20 years. You began by looking at the chronically homeless. These are people who are homeless consistently and for long periods of time. And you found that they really only made up 10 percent of the homeless population, but that they use a majority of the homeless services. Something like half of all shelter beds were occupied by chronically homeless people on a given night. What were your main conclusions?

DENNIS CULHANE: Well I think that in that particular study we were able to show that the people who are chronically homeless, the reason they're chronically homeless is they have substantial barriers to being able to maintain housing. Usually they have a severe mental disorder or they may have a chronic substance abuse issue. And without some kind of services in addition to a rent subsidy they can't get out of the homeless situation.

MARGOT ADLER: Now originally you were talking about individuals. Does the same thing ring true for families?

DENNIS CULHANE: Actually it doesn't. We just recently completed a study that looked at the patterns of homelessness among families, and we found a similar pattern in that there is a group of people, relatively small, about 20 percent, who are using up half of the shelter system resources, you know, occupying half the beds. But in contrast to the singles, we found that the families who stay the longest actually are higher functioning. They have lower rates of mental illness and substance abuse, lower rates of child welfare involvement, lower rates of disability. Sixty percent are employed in contrast to the people who stay homeless for brief periods of time.

MARGOT ADLER: Dennis, your research has changed how policymakers are thinking about homelessness. In fact many cities across the country are adopting a new model called Housing First, which in many ways is an outgrowth of your findings. Tell us why you think this approach is the right one.

DENNIS CULHANE: Well, it basically directly addresses the problem and much more directly than having people go through different kinds of programs. Homeless people fundamentally need a home and the first thing that we should be doing to assist them, whether they're families or single adults, is providing them with the assistance to have their own place to live. If people still need services, if the families need other services, education, etc., by all means we should be helping families or individuals access those things. But we should get to the end game, which is providing people with housing.

MARGOT ADLER: Ralph, you've been working with the homeless for decades. Tell us your thoughts on Housing First, and why do you think it's getting so much support from the Bush administration?

RALPH NUNEZ: I think it gets so much support because it's an easy answer. We think the Housing First--at least from our experience--model is a mistake. We don't think it's housing first. To get affordable low-income housing is such a rarity that you want to be sure that you have a product. It's almost a business model. We want to be sure once we put this family there we don't see them again. You know, when you take a family--half of our women, 47 percent, are victims of domestic violence; put them behind a closed door again, you're going to see this family again. We think we have an opportunity for the first time to really deal a right blow to poverty. To really bring people up before we move them out.

MARGOT ADLER: Dennis, is Housing First capable of addressing the other factors that often contribute to a family ending up homeless? A lack of education, finding adequate employment, the need for a safe place for victims of domestic violence?

DENNIS CULHANE: Sure. I mean, people who have, are homeless, are not unlike other people. They have other needs and they have other issues. And some folks don't have any major other needs or issues. But the fact is that like most of us, we can access services and resources in our community, as should people who are homeless. We don't have to go live in an institution in order to access those resources. Especially when you consider that the institutional costs are so exorbitant in this particular case. A recent study in New York, for example, found that these long-staying families it costs upwards of \$60,000 for a family to be in one of these facilities. You know, for that same amount that family could have five years of a permanent housing subsidy.

MARGOT ADLER: Ralph, I'd love you to respond and actually I'd like both of you to tell me where you think the main disagreement between the two of you is.

RALPH NUNEZ: Well, I'll tell you. The idea is--look, it's pretty simple--if you're going to pay later to try to correct this problem, if you can--once you put people behind closed doors they don't want you knocking on it. Or you're going to pay up front to correct this problem. And I think it's the upfront expense that's going to get more bang for the dollar, at least from what we see. About 90 percent of the families who've been through this program and who had problems that we've placed, we don't see again. We think that it's a mistake and we think this is why cities around this country continually have homeless problems. They're not addressing it. When a family comes to a shelter, everybody says okay the first thing we're going to do is work on your housing. Well, that's wrong. You'll do that for families that don't have problems, that are working poor and just down on their luck. The first thing we ought to work on are these issues of domestic violence and a parent who has to be able to pay those bills later on. Once you move to housing, who's going to pay for it? Are we going to make these people dependent and subsidize their housing for the rest of their lives? We have to make people independent. And the opportunity we see now is that the population is very young. Our mothers are in their twenties. We have an opportunity to really turn a whole family around.

MARGOT ADLER: Dennis?

DENNIS CULHANE: Well, I think we have to ask the people who are being affected by these problems first, and when you talk to people who are homeless, you know, the common enemy of homeless people is the shelter system. You know, it's the poorhouse of our time. And people fear going to the shelter system. It's an unnatural environment. Children and parents should be able to have a normal family relationship in their own dwelling. They should not be supervised by other people. They should not be exposed to other strange adults who they don't want in their lives. And when you speak to homeless people, that's what they tell you.

MARGOT ADLER: I'd like to ask both of you: It seems that there is apparently no region in the country where a full-time job at the prevailing state or federal minimum wage provides enough income to rent a one-bedroom apartment at a fair market rate. If this is true, isn't homelessness

just the tip of the iceberg, the most visible symptom of widespread economic distress, and an inability to afford housing for countless of Americans? I'll start with you, Dennis.

DENNIS CULHANE: Absolutely. The research shows that people who become homeless are not different from other poor people who happen to remain housed at the moment. So it's not as though there is a separate distinct group of families that are ending up in the homeless system. The people who are homeless share the same problem as everyone else, which is that housing is very expensive. And if poverty is the problem, which is a lack of income, then we need to address that problem, which is get people more income. We can do that on the short-term basis by giving them rent subsidies or even on a temporary or even on a long-term basis. And we can also do that by helping people get the skills they need to get into the labor market and to, you know, get into a job that pays a decent wage.

MARGOT ADLER: Ralph?

RALPH NUNEZ: Yeah, I wouldn't disagree with any of that. And when I talk about homelessness, again I have to stress this point: I'm not talking about a population that's any different than the rest of the people in poverty. I'm just telling you that if you're going to be poor in the 21st century at some point in time you're going to be homeless. I believe that so many of these other families, the 150,000 that Dennis talks about out there that are poor, that aren't in the system yet, at some point will be. This is a variable and then let's deal with poverty. I'm not interested in housing. I am not interested in subsidizing these families forever. I am interested in making them independent.

MARGOT ADLER: So when we look at these 10-year plans that the cities have put forward, I'd like to ask you both: Is a 10-year goal to end homelessness possible? We'll start with you Ralph.

RALPH NUNEZ: I don't believe so. I believe a 10-year plan is dead when it begins. The people are going to change. The players are changing. The politicians will change. The administrators will change. You may chip a little bit off with something, some unique idea, but the problem is still going to be here. Until this country really understands that we have to deal with poverty and with so many children living in poverty--and I don't care how we deal with it, whether it be in transitional housing, whatever, let's begin to reduce it--only then will you see some success in reducing homelessness.

MARGOT ADLER: Dennis?

DENNIS CULHANE: Well I think that the 10-year plans have been very valuable because they have, you know, drawn public attention to the problem. They've brought different sectors from society into the conversation. You know, not just the typical, you know, anti-poverty organizations, but bringing in mayors and governors, bringing in private sector business people who have a stake in this as well. So I think they've been very valuable for that purpose. And in many of these communities it has actually delivered a set of resources so that new housing can be developed for people who are chronically homeless, so that approaches that are more effective for families can also be tested. So I think that, you know, I'm not cynical about it. I think that these represent an opportunity to re-engage this issue in a substantive and newly important way.

MARGOT ADLER: Dennis Culhane is a professor of social welfare policy at the University of Pennsylvania. He studies homelessness and housing policy. Ralph Nunez is the president and CEO of Homes for the Homeless, a nonprofit organization in New York City, which provides transitional housing for homeless families. Thank you so much for talking with me today.

RALPH NUNEZ: Thank you.

DENNIS CULHANE: Thank you.

MARGOT ADLER: Coming up on Justice Talking:

UNIDENTIFIED FEMALE: It seems that the face of homelessness really has changed and it's now women and children.

MARGOT ADLER: Children and homelessness. Stay with us.

MARGOT ADLER: This is Justice Talking, where we make the connection between law and American life. I'm Margot Adler. We're talking about homelessness on today's show. A little later on, the challenges of providing healthcare to the homeless, and we'll hear from an advocate for the homeless who was himself homeless.

We can't really talk about homelessness without talking about children, because 40 percent of the homeless population is made up of families, mostly single moms with kids. There are an estimated 1.3 million homeless children each year, 40 percent of them are below the age of six.

Ellen Bassuk is the president and founder of the National Center on Family Homelessness, a research and advocacy group working with homeless children and their families. Welcome.

ELLEN BASSUK: Thank you very much.

MARGOT ADLER: I've heard that the average homeless person isn't actually an adult. It's a child.

ELLEN BASSUK: That's correct, because if you add it up, usually when they count, they usually count families as a single household and families usually consist of three people since there are two kids and a mother. So if you do the arithmetic it seems that the face of homelessness really has changed and it's now women and children.

MARGOT ADLER: Given the fact that there are so many homeless families, why don't you see more homeless children on the street?

ELLEN BASSUK: Homeless families are in most cities across the country and they're sheltered in facilities that are open 24 hours a day. In contrast, the shelters for adult singles are open only at night, so you see them wandering around the streets. If you go into the Deep South where it's a lot warmer, you'll see more families, and in some cities that don't keep their shelters open 24 hours a day, you'll see families on the streets.

MARGOT ADLER: You've spent a lot of time working directly with homeless children. What does homelessness do to children?

ELLEN BASSUK: Very bad things. Homelessness first of all is very scary to kids. It interrupts their life. When you become homeless you lose your routine, you lose your home, you lose your friends, pets, familiarity, your whole community. Then they move into very often a shelter where they have to live in one room with their mom and their siblings, which is really hard. If one of their siblings wakes up in the middle of the night then everybody is up all night. There's very little privacy and there's a lot of what they call "public parenting," so there are families sort of in each other's space.

MARGOT ADLER: And what are some of the psychological effects that you see?

ELLEN BASSUK: There are many. First of all homelessness is what we consider a traumatic stress. It's out of the realm of usual experience and it can have long-lasting effects. So you'll see kids who are very withdrawn and shy and not willing to really talk, to kids who will act out and become aggressive with friends, with peers, who might even become severe behavior problems in the classroom. But it's, you know, if you've had kids, what kids really love, particularly little kids, they love routine, and your routine is definitely disrupted.

MARGOT ADLER: I would also imagine that there's some embarrassment and shame.

ELLEN BASSUK: Oh, and you see that really particularly in the teens. I've had experiences of talking to teenagers who are in shelters who will tell you that they wouldn't tell anybody at school that they were living in a shelter and they'd keep it a secret because it felt so embarrassing.

MARGOT ADLER: Tell me a little bit about the health effects on children of homelessness.

ELLEN BASSUK: Well they're very broad-ranged. Homeless kids have more acute and chronic medical problems. In the mental health area the effects are really far-reaching. There's a very, very high level of exposure to violence in homeless people, which causes traumatic stress. Post-trauma responses that sometimes fall in the same category as some of the post-trauma responses that you'd see, let's say, in veterans of war.

MARGOT ADLER: Given these experiences, are most children able to recover from the experience? What are the long-term effects?

ELLEN BASSUK: We don't really know. We know that there certainly is a subset of kids who will go on and develop fairly serious mental health problems as a result of this experience. For

example, we followed a group of kids from the time that they were fairly young for a number of years. And we found that if you follow kids from, let's say, when they're newborns to six or seven years old or eight years old, we found that by age eight, one in three had a diagnosable mental disorder. Whereas if you look at kids in this population who are very little, let's say zero to two years old, they look the same as their housed counterparts, and they don't have a disproportionate percentage of any kind of mental problem that you can identify at that point. But what happens over that period of time is they're exposed to more and more stressors and as these stresses accumulate they become more vulnerable and then go on to develop mental health issues. And then that cycle interferes with their ability to perform well in school and keep up with other kids and to pay attention and to learn.

MARGOT ADLER: The shelter system as it exists now was originally designed to help individuals. How are shelters dealing with kids?

ELLEN BASSUK: Well what's happened over the years is as the homeless family population has increased they've been sheltered in separate facilities from the singles. In the late 1980s when I started in this area, the families were sheltered with the singles and that was a very big problem, particularly in shelters that were so-called "wet," where there were active substance abusers. Now in a lot of cities they're sheltered in completely separate facilities.

MARGOT ADLER: I've also heard that some shelters won't let teenage boys into the shelters even if they're with their moms.

ELLEN BASSUK: That's right. And that accounts for a huge amount of family separation. About one in five of these families has had at some point a child placed out of the family. Some shelters won't accept teenage boys because of the fear of violence and because of how upsetting it is to a mother who's been in a violent relationship, let's say, with a partner. So they exclude teenage boys, which means that those boys will be placed with a family member. Some will end up in foster care.

MARGOT ADLER: And are the fears of violence justified?

ELLEN BASSUK: I don't think so. The fear of violence itself is justified. Whether it will actually happen or not is another story. A lot of the moms who have been in violent relationships get triggered or extremely upset at any threat of violence or aggressive behavior. So a teenaged boy could be unwittingly provocative and that would scare a mother who has had a long-standing relationship of abuse or abuse as a child. So in some ways they're trying to protect the moms or other family members who have been exposed to violence.

MARGOT ADLER: Is there anything else that you want to add that you haven't said?

ELLEN BASSUK: This is an urgent social problem and I think that the problems of the children to a large degree have been relatively ignored. The focus on homelessness is on different other populations. And I think that if we can act while these kids are very young, we can do a lot to prevent the long-term problems that I've been describing.

MARGOT ADLER: Ellen Bassuk is the president and founder of the National Center on Family Homelessness, a research and advocacy group working with homeless children and their families. Thank you so much for talking with me on Justice Talking.

ELLEN BASSUK: Thank you for having me. I appreciate it.

MARGOT ADLER: Healthcare is a major issue for people who are homeless. As you might assume, getting access to care is a challenge for people living on the street. But providing care to the homeless also presents some unique obstacles for doctors and nurses. Marion Scott knows this all too well. She has been a nurse for over 30 years. She's also the executive director for the Harris County Hospital District Healthcare for the Homeless. I called her in her office in Houston, Texas and asked her to tell me about the kinds of healthcare issues faced by people who are homeless.

MARION SCOTT: Well, you know, I think that the healthcare issues that are encountered by homeless individuals are the same kind of conditions that are experienced in the general population. However, the limited or restricted access to available services because they're homeless heightens the actual severity of the diseases or management of the conditions that they suffer from.

MARGOT ADLER: We always hear about issues like substance abuse. We hear about mental illness. But are there specific medical conditions that you see a lot among the homeless?

MARION SCOTT: On the street you tend to see more things like assault. You see foot conditions. You see chronic diseases that have been untreated and addressed like hypertension that an individual may have but has not been able to get medicines or get in to see a doctor because they actually have to take the little monies that they may have from selling papers on the street to eat.

MARGOT ADLER: What kind of conditions do you see in the shelters?

MARION SCOTT: In the shelter program that we have we see diabetes. We see the hypertension. We see the foot problems. We see the substance abuse. We see skin problems. We see back problems. We see mental health issues, and dental. Dental is a big issue that we see, lack of ability to access dental services.

MARGOT ADLER: I would imagine that it would be hard to regulate some diseases. For example, I'm thinking about needing insulin, for example. Don't you have to refrigerate it?

MARION SCOTT: It's important to know then where the homeless individual is. On the street it's a very big problem. It's been my experience with nursing, the treatment plans tend to be based on the assumption that people or patients have the basic food, clothing, and shelter. By that I mean that if an individual who is a diabetic is seen, the assumption is I can order insulin. Not really thinking that the insulin needs to have a refrigerator, because most people have it.

MARGOT ADLER: At what point do the homeless seek medical help?

MARION SCOTT: There are several different arenas. Sometimes they seek help once they have a severe condition or a traumatic condition. But sometimes it's more of a health maintenance. They need assistance with maintaining health.

MARGOT ADLER: It seems to me that it's sometimes hard to access prescription medications even if you're not homeless. You know, so I keep on wondering how can you refill a prescription if you don't have a regular pharmacy or you don't have a fixed address?

MARION SCOTT: Well, there are different ways. You know, many of the shelter clinics, we have "class D" pharmacies where we have actually a license to have prescription medicines inside of the shelter. We've even taken physicians on our mobile unit who see to individuals who needed medications. And then the chore becomes finding usually a shelter, or some group may, once the individual has the prescription, will volunteer to pay for the prescription for the individual.

MARGOT ADLER: I want you to talk a little more about what you're calling "the culture of homelessness." How does it work and how does it influence what you do?

MARION SCOTT: Once you understand how health problems cause homelessness, and how homelessness causes health problems, and how homelessness complicates efforts to treat health problems, and you live and breathe those three parameters, I think it then becomes clear that you don't, as a provider--say that you need to wash your hands after changing your dressing to a person who lives on the bayou, under the bridge, because there's no running water, so, you know, then that you have to find an alternative method of providing them with hand sanitizer. Or even providing them with a place where they can not just get the dressings that they need but a place to keep the dressings clean.

MARGOT ADLER: Healthcare is such a difficult issue in our society altogether. Do you think that healthcare for the homeless would be less difficult if we had national health insurance?

MARION SCOTT: I definitely believe in that. Universal health insurance I think would tremendously impact and minimize the barriers that homeless individuals face. The prioritization and day-to-day survival is built around the acquisition of food, clothing, and shelter. So, yes, I do believe that universal healthcare would greatly impact the healthcare for homeless individuals.

MARGOT ADLER: Marion Scott is the executive director for the Harris County Hospital District Healthcare for the Homeless in Houston, Texas. Thank you so much for talking with me.

MARION SCOTT: Thank you for having me.

MARGOT ADLER: While there are approximately 750,000 homeless people, the reality is that most of them won't remain homeless for a long time. Roosevelt Darby is one such example. He was born and raised in North Philadelphia. He first tried drugs as a teenager. Following high school he received an associate's degree from Temple University. He began working at a research company in Allentown. But he was still using drugs.

ROOSEVELT DARBY: After a while it began to catch up with me. I found myself doing more and more drugs. And then crack cocaine hit Philadelphia in a big way in the early '80s. I found myself caught up in that cycle and tried to continue to hold onto my job and do that at the same time. But the drugs won out. I made excuses about, you know, losing my job as a result of my addiction and moving back here to Philadelphia with my family who were very supportive until they learned later on down the road that all of my problems were a result of my drug use.

MARGOT ADLER: In 1990 Roosevelt entered a drug rehab program while living with his family in Philadelphia. He was struck by how many people in the program were homeless. A majority of them lived in shelters while receiving drug counseling. When Roosevelt failed to stay clean despite the program, he was no longer welcome in his family's home.

ROOSEVELT DARBY: And so at this time, you know, I found myself out on the street. And so I went into an emergency shelter and they didn't have any beds at that time and so I had to sleep on the floor. And so it all hit me at that time that I was on that floor that, you know, this is not quote-unquote "the way your mama raised you."

MARGOT ADLER: Roosevelt lived at the shelter for the next year. He attended a second round of outpatient drug counseling, this time with lasting results.

ROOSEVELT DARBY: While I was living in the shelter they had a pilot program there for folks who were homeless as a result of substance abuse. And I was able to involve myself in that program. And for some reason, you know, folks thought that I had some leadership qualities. They voted me as team captain while I was living in the shelter.

MARGOT ADLER: As team captain, he advised homeless men and women. He also began volunteering at the Philadelphia Committee to End Homelessness, a nonprofit advocacy organization. It became a full-time job and he's been working there for 16 years. Today Roosevelt serves as the deputy director. The organization provides everything from drug and alcohol treatment to job counseling to simply being a place to take a hot shower and get a clean change of clothes. He helps people navigate the maze of homeless services.

ROOSEVELT DARBY: Most of the time, you know, if you ask many of your listeners, for example, if they became homeless today or tomorrow, what would they do? They probably don't know because this is not something, this system is not something that you walk into fully understanding what's it about and how it operates.

MARGOT ADLER: Roosevelt has co-authored a plan to end homelessness in Philadelphia by 2010 or sooner. But as he explains, ending homelessness will also take a change in attitude among the American public.

ROOSEVELT DARBY: What we've done is, you know, we've perpetuated the myth that people are homeless because they want to be. You know, I cringe every time I hear somebody say that because, you know, I talk to a lot of folks, even elementary school kids, and, you know, I ask them: What do you want to be when you grow up? And you know they give me all these kinds of things but none of them are homeless.

MARGOT ADLER: Roosevelt Darby is the deputy director of the Philadelphia Committee to End Homelessness. To learn more about that organization, go to our website, justicetalking.org.

While there, check out our blog, where many of the nation's leading commentators give their views on law and American life. You can join the discussion and you can sign up for our free podcasts, too. Thanks for listening. I hope you'll tune in next week. I'm Margot Adler.
