



THE NATIONAL CENTER ON
Family Homelessness
for every child, a chance

America's Youngest Outcasts

**Written Testimony for Raquel Rolnik, United Nations Special Rapporteur on Housing
Submitted by The National Center on Family Homelessness
Monday, October 26, 2009**

Issue: Child and family homelessness in the United States

About The National Center on Family Homelessness

The National Center on Family Homelessness, founded in 1988, is the nation's foremost authority on family homelessness, and the only national organization dedicated solely to helping homeless families. Through state-of-the-art research, program design and public education, The National Center is committed to ending family homelessness in America.

State Report Card on Child Homelessness

In March 2009, The National Center on Family Homelessness published *America's Youngest Outcasts: State Report Card on Child Homelessness*. The report presents the clearest snapshot yet of the 1.5 million children who are homeless each year—where they live and the consequences of their precarious situations. We collected and analyzed data from all 50 states along four major domains: extent of child homelessness, child well-being, risk for child homelessness, and state policy and planning efforts. A composite of these four domains was used to rank the states. Although the states are ranked from 1 to 50, there are homeless children in every state, and work must be done throughout the country to ensure that no child in the United States is homeless for even one day.

Campaign to End Child Homelessness

The release of *America's Youngest Outcasts* by The National Center on Family Homelessness launched a national Campaign to End Child Homelessness. The Campaign is an initiative to bring together homeless service providers, children's advocates, community leaders, families, policymakers, elected officials and others at local and national levels to galvanize public and political will to end this national crisis. Based on the belief that it is unacceptable for any child in the United States to be homeless for even one day, the Campaign is initiating an array of national, state and local activities to address the tragedy of child homelessness in America.

Overview of Child and Family Homelessness

In the United States each year, one in 50 children is homeless—more than one and a half million children—and with the deepening economic recession, this number is growing.¹ A typical family who is homeless is comprised of a mother in her late twenties with two children.² Almost half (650,000) of children in homeless families are under 6 years.³ Eighty-four percent of families experiencing homelessness are female-headed.⁴ With increasing unemployment, staggering numbers of foreclosures and escalating food and gas prices, the number of children

and families without homes in the United States is also likely to continue to increase. Not since the Great Depression have so many children stood in the sight line of homelessness.⁵

Homelessness is fundamentally a housing crisis. Nowhere in America can a full-time worker earning minimum wage afford to rent a two-bedroom unit priced at fair market value.⁶ Even with two full-time minimum wage earners, decent housing is just barely attainable.⁷ Housing is clearly an essential component of the solution, but for many families and children, it is not sufficient. If we are concerned about the well-being of our nation's children, services and supports must be part of the solution.

As we know, homelessness and poverty signify the degradation of all human rights. Homeless children live in unstable, unsafe circumstances. Their access to health care and education is erratic. They experience hunger, are exposed to violence and their relationships with friends, family and caretakers are disrupted. These factors combine to create a life-altering experience that inflicts profound and lasting scars.

Child and family homelessness in America is caused by the combined effects of lack of affordable housing, extreme poverty, decreasing government supports, changing demographics of the family, the challenges of raising children alone, domestic violence and fractured social supports. As the gap between housing costs and income continues to widen, more and more families are at risk of homelessness. For extremely poor families and those with vulnerabilities or little safety net, even a seemingly minor event can trigger a catastrophic outcome and catapult a family onto the streets. Among those living in poverty, families and children experiencing homelessness are the most marginalized and vulnerable. Not only are they subjected to extreme poverty, but they lack the safety, comfort, privacy, reassuring routines, relationships and community that come with having a home.

Homelessness Renders Children and Families Vulnerable to Human Rights Violations

Homelessness is a life-altering experience that can have profound and lasting effects.

- Homelessness makes children and families sick.
 - Mothers who are homeless are often in poor physical health.
 - Over one-third have a chronic physical health condition.⁸
 - They have ulcers at four times the rate of other women.⁹
 - Mothers experiencing homelessness struggle with mental health issues.
 - About 50% have experienced a major depressive episode since becoming homeless.¹⁰
 - They have three times the rate of Post Traumatic Stress Disorder and twice the rate of drug and alcohol dependence.¹¹

- Homeless children are sick four times more often than other children.¹² They have:
 - Four times as many respiratory infections.¹³
 - Twice as many ear infections.¹⁴
 - Five times more gastrointestinal problems.¹⁵
 - Four times more likely to have asthma.¹⁶
 - Three times the rate of emotional and behavioral problems compared to non-homeless children.¹⁷
 - Go hungry at twice the rate of other children and more than one-third of homeless children report skipping meals.¹⁸
 - Suffer from obesity due to inadequate nutrition.¹⁹
- Children and families experiencing homelessness struggle in school.
 - Homeless children are twice as likely as other children to repeat a grade in school, to be expelled or suspended and to drop out of high school.²⁰
 - They are four times more likely to show delayed development and are twice as likely to have learning disabilities as non-homeless children.²¹
 - More than half of all homeless mothers do not have a high school diploma.²²
- Homeless children and families experience high rates of violence and trauma.
 - Many families who are homeless have been witness to or have experienced violence within their communities, families and lives.
 - Over 92% of homeless mothers have experienced severe physical and/or sexual abuse during their lifetime.²³ For 63%, this abuse was perpetrated by an intimate partner.²⁴
 - By age 12, 83% of homeless children have been exposed to at least one serious violent event.²⁵
 - Almost 25% of homeless children have witnessed acts of violence within their families.²⁶

The Impact of Trauma on Homeless Children and Families

Homelessness is an extremely traumatic experience. For many families, the stress of homelessness is compounded by past traumatic experiences, including catastrophic illness,

abrupt separations and physical or sexual abuse. Traumatic stress impacts every aspect of a person's life, including response to danger, ability to form sustaining relationships, decision-making, physical and mental health and ability to maintain housing and employment. Given the extensive trauma in the lives of people experiencing homelessness, it is essential that services and programs are trauma-informed.

Recommendations for Preventing and Ending Child and Family Homelessness*

The President, Congress and each of the States must take immediate action to prevent and end the unnecessary tragedy of child homelessness in America. Overall, we found that the failure to develop a comprehensive strategy, on the part of the federal government and the states, has resulted in inadequate efforts to end child and family homelessness. There are many federal programs that aim to support low-income families and children, but many are underfunded and do not reach homeless families and children. Some states have done a better job than others in making child homelessness a policy and programmatic priority; however, 24 states have done little or no planning to end child homelessness.²⁷

Along with housing we must address income, trauma, health care, education, support services and research and planning. All levels of government and the private sector must plan, coordinate their activities and provide resources. Only then can we end this tragic problem.

- **Housing:** Expand affordable housing opportunities for homeless and at-risk families by increasing the numbers of available units and making existing housing options more affordable. Fully capitalize the National Housing Trust Fund—a federal program for the production, preservation, rehabilitation, or operation of rental housing— at \$10 billion for two years to rehabilitate or build 100,000 rental homes for the lowest income households. Create state and local housing trust funds to complement the National Housing Trust Fund. Fund 400,000 new housing vouchers at \$3.6 billion for two years to provide the lowest income households for rent assistance.
- **Income:** Support homeless family efforts to access and maintain jobs that pay a livable wage and provide stop-gap measures for those unable to find employment. Expand the TANF contingency fund so that states are able to provide cash assistance to the increasing number of very poor families. Suspend TANF limits for homeless families. Expand access to post-secondary education and job training programs.
- **Trauma:** Develop family-oriented services to treat the extreme trauma of homelessness. Ensure that a portion of funding for the Emergency Shelter Grant program is dedicated to trauma-informed services for homeless children and families which provide a way to understand behaviors, responses, attitudes and emotions as a collection of survival skills developed in response to traumatic experiences. Account for and respond to high rates of violent victimization in all programs for homeless women and their children including developing appropriate assessment strategies, staff training, comprehensive service delivery (legal, addiction, physical and mental health, housing, etc.) and integrated

systems. Respond to intimate partner violence and family homelessness in a way that helps mothers to care for and protect their children including legal, financial and emotional support.

- **Health Care:** Ensure a healthy future for all homeless children by comprehensively addressing their health and mental health needs. In all health care reform efforts, ensure that all homeless children are enrolled in Medicaid or the State Children's Health Insurance Program. Increase the number of homeless children and families who have access to mental health services. Increase participation in the federal nutrition programs, including the Supplemental Nutrition Assistance Program (formerly the Food Stamp Program).
- **Education:** Ensure that every child can enroll in and attend school while receiving the services they need to succeed regardless of their housing status by fully funding Subtitle B of Title VII of the McKinney Vento Homeless Assistance Act at \$210 million. Improve access and supports for uninterrupted schooling, such as transportation.
- **Supportive Services:** Invest \$3 billion in funding for child care vouchers for children experiencing homelessness so that they can receive the early care and education they deserve, and so that their parents can engage in employment, job training and other activities to lift their family out of homelessness. Fully fund the Violence Prevention and Services Act at \$175 million and increase the Victims of Crime Act Cap to \$717 annually.
- **Research and Planning:** Maximize efforts to understand and address child homelessness through increased federal planning and research efforts. Require all studies and programs supported by federal agencies and serving low-income people to collect data on the housing status of program beneficiaries. Ensure homeless children and families are included and prioritized in federal and state plans to end homelessness. Coordinate Congressional Committee activities on homelessness with federal and state activities.

As a nation, we can no longer ignore the fact that more than 1.5 million American children go without homes, access to physical and mental health care, food and educational opportunities while experiencing tremendous stress. Now is a time of great change, and now is the time to end child and family homelessness in the United States.

For More Information

For more information, contact Christina Jordan, Director of the Campaign to End Child Homelessness, at Christina.Jordan@familyhomelessness.org or at 617-969-7146. Visit www.HomelessChildrenAmerica.org to learn more about the data and recommendations published in *America's Youngest Outcasts* and get involved in the Campaign to End Child Homelessness. For more information on The National Center on Family Homelessness, visit www.familyhomelessness.org.

*A more comprehensive set of state and federal recommendations are listed in *America's Youngest Outcasts: State Report Card on Child Homelessness* (The National Center on Family Homelessness, 2009).

¹ The National Center on Family Homelessness. (2009). *America's Youngest Outcasts: State Report Card on Child Homelessness*. Newton, MA: The National Center on Family Homelessness.

² Burt, M.R. & Aron, L.Y. (2000). *America's Homeless II: Populations and Services*. Washington, D.C.: The Urban Institute.

³ Burt, M.R. & Aron, L.Y. (2000). *America's Homeless II: Populations and Services*. Washington, D.C.: The Urban Institute.; The National Center on Family Homelessness. (2009). *America's Youngest Outcasts: State Report Card on Child Homelessness*. Newton, MA: The National Center on Family Homelessness.

⁴ U.S. Department of Housing and Urban Development, Office of Community Planning and Development. (2007). U.S. Department of Annual Homeless Assessment Report to Congress. Available at www.huduser.org/Publications/pdf/ahar.pdf

⁵ The National Center on Family Homelessness. (2008). *America's Youngest Outcasts: State Report Card on Child Homelessness*. Newton, MA: The National Center on Family Homelessness.

⁶ National Low Income Housing Coalition. (2008). *Out of Reach 2007-2008*. Washington, D.C.: National Low Income Housing Coalition.

⁷ National Low Income Housing Coalition. (2008). *Out of Reach 2007-2008*. Washington, D.C.: National Low Income Housing Coalition.

⁸ Bassuk, E.L., Weinreb, L.F., Buckner, J.C., Browne, A., Salomon, A. & Bassuk, S.S. (1996). The characteristics and needs of sheltered homeless and low-income housed mothers. *Journal of the American Medical Association*, 276(8), 640-646.

⁹ Weinreb, L.F., et al. (1998). The health characteristics and service use patterns of sheltered homeless and low-income housed mothers. *Journal of General Internal Medicine*. 13(1), 389-397.

¹⁰ Weinreb, L., et al. (2006). A comparison of the health and mental health status of homeless mothers in Worcester, Mass: 1993 and 2003. *American Journal of Public Health*, 96(8), 1444-1448.

¹¹ Bassuk, E.L., Weinreb, L.F., Buckner, J.C., Browne, A., Salomon, A. & Bassuk, S.S. (1996). The characteristics and needs of sheltered homeless and low-income housed mothers. *Journal of the American Medical Association*, 276(8), 640-646.

¹² Weinreb, L., Goldberg, R., Bassuk, E. & Perloff, J.N. (1998). Determinants of health and service use patterns in homeless and low-income housed children. *Pediatrics*, 102(3), 554-562.

¹³ The National Center on Family Homelessness. (1999). *Homeless Children: America's New Outcasts*. Newton, MA: The National Center on Family Homelessness.

¹⁴ The National Center on Family Homelessness. (1999). *Homeless Children: America's New Outcasts*. Newton, MA: The National Center on Family Homelessness.

¹⁵ The National Center on Family Homelessness. (1999). *Homeless Children: America's New Outcasts*. Newton, MA: The National Center on Family Homelessness.

¹⁶ The National Center on Family Homelessness. (1999). *Homeless Children: America's New Outcasts*. Newton, MA: The National Center on Family Homelessness.

¹⁷ National Child Traumatic Stress Network. (2005). Facts on Trauma and Homeless Children. Retrieved from www.nctsn.org/nctsn_assets/pdfs/promising_practices/Facts_on_Trauma_and_Homeless_Children.pdf.

¹⁸ The National Center on Family Homelessness. (1999). *Homeless Children: America's New Outcasts*. Newton, MA: The National Center on Family Homelessness.

¹⁹ Schwarz, K.B., Garrett, B., Hampsey, J. & Thompson, D. (2007). High prevalence of overweight and obesity in homeless Baltimore children and their caregivers: a pilot study. *Clinical Nutrition and Obesity*. 9(1): 48; Grant, R., Shapiro, A., Joseph, S., Goldsmith, S., Rigual-Lynch, L. & Redlener, I. (2007). The health of homeless children revisited. *Advances in Pediatrics*, 54(1), 173-187.

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- ²⁰ The National Center on Family Homelessness. (1999). *Homeless Children: America's New Outcasts*. Newton, MA: The National Center on Family Homelessness.
- ²¹ The National Center on Family Homelessness. (1999). *Homeless Children: America's New Outcasts*. Newton, MA: The National Center on Family Homelessness.
- ²² Burt, M.R. (2001). What will it take to end homelessness? Washington, D.C.: The Urban Institute.
- ²³ Bassuk, E.L., Weinreb, L.F., Buckner, J.C., Browne, A., Salomon, A. & Bassuk, S.S. (1996). The characteristics and needs of sheltered homeless and low-income housed mothers. *Journal of the American Medical Association*, 276(8), 640-646.
- ²⁴ Browne et al. (1997). Intimate violence in the lives of homeless and poor housed women: Prevalence and patterns in an ethnically diverse sample. *American Journal of Orthopsychiatry*, 67(2), 261-278.
- ²⁵ Bassuk, E.L., Weinreb, L.F., Buckner, J.C., Browne, A., Salomon, A. & Bassuk, S.S. (1996). The characteristics and needs of sheltered homeless and low-income housed mothers. *Journal of the American Medical Association*, 276(8), 640-646; Bassuk, E.L., et al. (1997). Homelessness in female-headed families: childhood and adult risk and protective factors. *American Journal of Public Health*, 87(2), 241-248. Buckner, J. et al (2004). Exposure to violence and low-income children's mental health: Directed, moderated, and mediated relations. *American Journal of Orthopsychiatry*, 74(4), 413-423.
- ²⁶ Bassuk, E.L., Weinreb, L.F., Buckner, J.C., Browne, A., Salomon, A. & Bassuk, S.S. (1996). The characteristics and needs of sheltered homeless and low-income housed mothers. *Journal of the American Medical Association*, 276(8), 640-646; Bassuk, E.L., et al. (1997). Homelessness in female-headed families: childhood and adult risk and protective factors. *American Journal of Public Health*, 87(2), 241-248. Buckner, J. et al (2004). Exposure to violence and low-income children's mental health: Directed, moderated, and mediated relations. *American Journal of Orthopsychiatry*, 74(4), 413-423.
- ²⁷ The National Center on Family Homelessness. (2009). *America's Youngest Outcasts: State Report Card on Child Homelessness*. Newton, MA: The National Center on Family Homelessness.