

IN THE RED CROSS AND RED CRESCENT WORLD

ACTIVITIES OF NATIONAL RED CROSS AND RED CRESCENT SOCIETIES

Recognizing the needs of the homeless and hungry in unexpected places— the United States

The phenomena of homelessness and hunger in the United States has received growing attention in the last ten years. As recent international focus on the millions of people starving throughout the world has increased, so has the American consciousness increased about the presence of hungry people in our own backyard. Few, if any, governmental or private agencies can now ignore or fail to recognize the needs of the homeless and hungry in the provision of services.

The American Red Cross has participated, as a member of the national voluntary human service delivery system, in the documentation of the homeless situation. American Red Cross chapters around the country have responded to the documented needs of the homeless and hungry with community-based programmes which reflect our fundamental commitment to the universal principle of service wherever and whenever it is necessary.

A review of the homeless phenomena in the United States and within the American Red Cross can be important to the Movement's overall understanding of the scope and indiscriminate nature of the problem. The following excerpts from recent American Red Cross publications is evidence that homelessness and hunger are found in unexpected places, i.e., the United States of America.

Introduction

The homeless, as individuals far outside the mainstream of society, have been increasing significantly in number since the early 1970s. They are, in many respects, a disenfranchised group, having few spokespersons or advocates for their problems, and essentially lacking political representation, since voter registration requires some kind of fixed address. The

magnitude of the problem is noted in a report to the National Association of Governors. The report states, "Not since the Great Depression have so many people faced survival at the margins of society."¹

The "bag ladies," "grate men," and "street beggars" are perhaps the most visible, but they are only one group of the homeless. There are many others who, though less obvious, are equally impacted by being homeless and who, for a variety of reasons, may be even less likely to survive the rigors of such an existence.

The growing problem of involuntary homelessness requires special attention. Indeed, this problem has reached sufficient proportions to foster an area of specialization within the human services field.² There is mounting concern among leaders and planners at all levels that homelessness, for at least some individuals, is becoming a permanent state. The Red Cross clearly cannot solve this problem singlehandedly, but it is in an excellent position to provide positive leadership in realistically addressing this need.

How many people are homeless?

Assessing the number of people who are homeless depends on the definition of homelessness, the methodology used to count these people, and when they are counted.

The dictionary simply describes them as "lacking a home."

Researchers define the homeless as "anyone without an address which assures them of at least the following thirty days' sleeping quarters which meet minimal health and safety standards."³

The National Governor's Association defines them as "persons or families who, on (any given) day or night, have neither friends, family, nor sufficient funds which will provide for certain elementary resources they need to survive."⁴

The U.S. Department of Health and Human Services definition of the homeless is: "Those who lack shelter and the financial resources necessary to acquire it, and who revert to seeking food and shelter from public or private facilities."⁵

¹ *1933-1983—Never Again*. A report to the National Governor's Association Task Force on the Homeless, July 1983.

² For example, schools of social work are offering courses on the homeless.

³ A report to the National Governors' Association Task Force on the Homeless, July 1983.

⁴ *Ibid.*

⁵ *Homeless Briefing, Background, Analysis, and Options*, p. 1., U.S. Department of Health and Human Services. (No date.)

Varying definitions of homelessness lead to differing appraisals of the scope of the problem. Reliable data collection is nonexistent because methodology varies widely. Nor is there any one government agency that collects data on the homeless. Many organizations providing services to the homeless do not count individuals differently from families, nor do they count the different types of problem individuals—alcoholics, the elderly, and so on.

Even the most comprehensive attempt to study the homeless, prepared by the U.S. Department of Housing and Urban Development (HUD), Office of Policy Development and Research, has come under attack for its methodology. In its report, entitled "A Report to the Secretary on the Homeless and Emergency Shelters," HUD calculates the number of homeless based upon an estimate within a city or metropolitan area. However, what constitutes a metropolitan area is not defined. Without a clear definition of metropolitan area, many homeless people could be excluded. An undercount of the metropolitan population results in a lower projection of the total homeless population.

In all reports that consider the size of the problem, there are major discrepancies between local and national and between private and government studies generally resulting from different definitions and measurement systems. The HUD report, for example, distinguishes between the chronically homeless and the occasionally homeless. Yet, what percentage of people in emergency shelters are "chronically homeless" is not clear. However, it does appear that a significant number of persons need emergency services only at certain times, moving in cycles from boarding residences—when they have work—to the homes of relatives or friends, to the streets, to emergency shelters, to other temporary living arrangements, and back to emergency shelters.

The HUD report estimates the number of homeless to be from 192,000 to 586,000 persons, with the most commonly used figure being 250,000 to 350,000. In contrast, private organizations and the U.S. Conference of Mayors claim that there are more than three million homeless in America. All current national numbers are based on estimates, not on actual counts.

The HUD report further estimates that nation wide, "111,000 people can be housed on any given night in emergency shelters."⁶ If we take a HUD figure of 350,000 homeless and compare it to 111,000 beds, then on any given night there is the possibility that 241,000 people do not receive

⁶ *A Report to the Secretary on the Homeless and Emergency Shelters*. U.S. Department of Housing and Urban Development, Office of Policy Development and Research, May 1984, p. 34.

shelter. If the three million figure is correct, 110,000 beds do not begin to address the problem. In other words, no matter which estimate of the number of homeless is accepted, it is indicative of a serious problem.

There is general agreement that the homeless are more prevalent in large cities. But, the homeless population in some cities varies because of local economic conditions, location, and season. Some Western cities have a significant group of homeless who have migrated west seeking work.⁷

From the variety of estimates, we must conclude that no definitive demographic data on the homeless population will be available until standardized surveys provide reliable seasonal and annual estimations.

Who are the homeless?

The traditional characterization of a homeless person is of a single, middle-aged, white, alcoholic male. While that may have been true some years ago, today the homeless are a much more heterogeneous group comprising single women and battered wives as well as men: people of all age groups (including runaway youths); blacks, hispanics and whites; those with alcohol-, drug-abuse, and mental-health-related problems; families as well as single persons; those who have never been employed (or who have been unemployed for a very long period of time), and those who are recently unemployed.⁸

In every respect, the homeless are a very diverse population. These diverse factors are generally represented in most major metropolitan areas of more than one million people. The homeless population does not vary significantly in composition in different parts of the country, except in the south-west where large numbers of American natives and hispanics are found. The U.S. Department of Health and Human Services describes the homeless population as having the following characteristics:⁹

- The homeless are in their mid-thirties, much younger than in the past when the average was the mid-fifties;
- Between 15 and 25 per cent are women, a percentage that seems to be increasing;
- Between 40 and 50 per cent are minorities, although racial and ethnic composition tends to reflect that of local areas;
- Family groups comprise 20 to 30 per cent;

⁷ *Ibid.*

⁸ *Ibid.* p. 22.

⁹ *Homeless Briefing, Background, Analysis, and Options*, U.S. Department of Health and Human Services. (No date) p. 5.

- Between 50 and 60 per cent remain in a single city for one or more years, although transiency is more significant in warmer climates;
- One-half to two-thirds have completed high school, and between 25 to 30 per cent have attended college.

All of these diverse types of individuals can be grouped into three major categories:

1. People with chronic disabilities—mental, physical, or both;
2. People who have experienced severe personal crises;
3. People who have suffered from adverse economic conditions.

These categories are not mutually exclusive. Some homeless individuals may display the characteristics of more than one group, or move from one group to another. The categories are described below:

The chronically disabled. According to the literature, people in this category are homeless because of the deinstitutionalization of mental patients. In 1955 there were 559,000 individuals in mental hospitals; in 1981 the figure had dropped to 125,000.¹⁰

There is considerable controversy about the annual percentage of homeless who are mentally ill. Nevertheless, they represent a significant percentage of the population.¹¹ Most of the mentally ill in shelters or on the streets cannot be admitted to mental hospitals because of restrictive admission policies.

Therefore, many mentally ill people go through a revolving door of emergency hospital, jails, and back to the streets. At the utmost, they receive short-term outpatient treatment. What chronically mentally ill people need are long-term living arrangements designed and operated specifically for them.

People in crises. The second major category of homeless persons comprises the following individuals or groups: battered women, one-parent families, the individual who has been released from jail, people with severe marriage or family problems, and runaway youths. Most of these people are considered to be homeless for a limited period of time. However, if they don't have or can't obtain the resources to resolve their crises, they risk continued homelessness.

Economicallly impacted. In the third major category are people who have suffered as a result of federal and state budget cuts and eligibility restrictions in programmes serving the poor (e.g., low-income housing, Aid to Families with Dependent Children, Medicaid, and food stamps). This group also includes individuals and families who have been evicted for nonpayment of rent, elderly people living on small pensions, and the

¹⁰ *Ibid.* p. 5.

unemployed as well as professionals and skilled workers who cannot find jobs.¹¹

In this category are those people described as the “new poor.” These are individuals—many with families—who are unemployed and have exhausted all their personal resources and benefits. They are described as discouraged workers or underemployed and are no longer directly involved in the economy of the country.

The “new poor” also suffer from restrictive state and county regulations—along with the rest of the homeless—in that eligibility for general relief requires a permanent address. We can assume that many of these homeless people lack either knowledge of available services or how to obtain those services.

Why are people homeless?

Homelessness is not a uniform phenomenon. Its causes are many and the proportional contributions of relevant factors vary from place to place.

The ultimate causes and precipitating factors that result in homelessness are sometimes difficult to distinguish. However, there are five reasons about which there is general consensus.

1. Deinstitutionalization of the mentally disabled

In 1963 Congress passed the Community Mental Health Centers Act. The act was directed toward the release of mental health patients who were not a “danger to themselves or others.” Large numbers of psychiatric (including alcoholic and drug-abuse) patients were discharged with insufficient consideration of their residential placement outside of the hospital. In most states, no resources existed to maintain these people within the community. Community mental health centers do not provide for basic survival needs and often resist providing services to this type of person. In addition, owing to the restrictive admission criteria, there are a number of young adults suffering from chronic mental illness who have never been institutionalized.

Persons who are chronically mentally ill share much in common with other disadvantaged groups. However, they differ in one major respect. Chronic mental illness impairs their most basic thought processes, affecting how they perceive and relate to the world around them. It is therefore often difficult for them to recognize their own needs or to know how to seek out

¹¹ *Op. cit.*, p. 7.

or utilize the kinds of services that may be available for other groups of disadvantaged persons.

2. *The shortage of low-income housing*

Over the grim statistics on homelessness looms the shadow of a housing crisis. Current estimates by the National Housing Law Project place the number of people who are involuntarily displaced from their homes each year at two-and-one-half million.¹² These individuals and families are casualties of revitalization projects, eviction, economic development projects, and demolition.¹³

A number of studies have shown how loss of housing can be the immediate precipitating cause of homelessness.¹⁴ The major victims of displacement are the poor, the very people who have the fewest resources to absorb or recover from new hardship.

3. *Reduction in disability benefits*

Intensified reviews of eligibility and disability requirements, initiated at the federal level, have resulted in many people losing their benefits. The *Congressional Quarterly Weekly Report* estimates that 350,000 people had lost their disability benefits as of June 1983. When these benefits are terminated, people lose their primary or sole source of income. With no income and no prospect of a job, many are forced into homelessness. It should be noted that many people who lose their benefits often have neither the knowledge nor the ability to challenge the ruling.

4. *Low levels of assistance*

Those individuals and families who do receive some form of public assistance often do not receive enough to cover their basic needs or are eligible for a limited time only. Local welfare and food stamp programmes are not indexed to the cost of living. Welfare recipients must often make choices of whether to pay for food, rent, or utilities. Such choices are generally forced by an increase in rent or an eviction with no other affordable housing available.

Moreover, if the federal budget cuts or programme freezes proposed for fiscal year 1987 are adopted, States can be expected to further cut benefits and reduce eligibility.

¹² *Displacement: How to Fight It*. National Housing Law Project, 1982.

¹³ *One Year Later: The Homeless Poor in New York City 1982*. Community Service Society of New York, June 1982, p. 3.

¹⁴ *Housing Restoration and Displacement*. Editorial Research Reports. Vol. II, pp. 361-380. *The Homeless: Growing National Problem*. Editorial Research Reports. Vol. II, pp. 796-800. October 1982.

If the community service block grants or Emergency Food and Shelter National Board Program (FEMA) monies are reduced, local voluntary and religious organizations and local governments will be hard pressed to assist in providing for the homeless.

5. Domestic violence and homeless youth

Intolerable family situations, especially the battered women and their children and what social workers describe as “throwaway” youths, have become a major problem in the last five years.¹⁵ Unstable and violent home situations cause the victims to flee brutality and oppression without the means to care for themselves. The situation of battered women with children is desperate. Because of the lack of affordable housing, they have no option but to return to the abusive situation or to remain homeless.

What is being done for the homeless?

Surprisingly little is known about the nature and extent of efforts to assist homeless people. To determine what is being done, one would have to review every local study done by cities, counties and private groups as well as state and national studies.

According to the HUD report, about 80 per cent of the city and county governments do at least *one* of the following:

- Operate shelters;
- Give money to private groups to operate shelters or other services;
- Lease or rehabilitate buildings for private shelter providers;
- Provide vouchers to homeless persons for use in hotels, motels, or apartments.

It should be noted that these are all temporary services.

Nearly all programmes for the homeless are dependent, in some way, upon federal funds that are channeled through FEMA, the Social Security Administration, or block grant programmes. Many programmes for the homeless are also run by voluntary, non-profit, or religious organizations.

Even homeless programmes conducted by the private sector are usually funded to some extent by public monies as well as charitable contributions and with an extensive use of volunteers. The use of volunteers has been demonstrated time and again to greatly expand the amount of services offered.

¹⁵ *1933/1983—Never Again*. A report to the National Governors Association Task Force on the Homeless, July 1983.

In a recent development, two charitable foundations, the Robert Wood Johnson Foundation and the Pew Memorial Trust, are funding programmes for the homeless. These two foundations are committing \$25 million to 19 major cities to provide free health care to the homeless. In an attempt to co-ordinate government and private initiatives, the U.S. Department of Health and Human Services (DHHS) established the Federal Interagency Task Force on Food and Shelter in October 1983. Represented on the task force are the Departments of Agriculture, Defense, Interior, Labor, Housing and Urban Development, Commerce, and Transportation, as well as the General Services Administration, FEMA, Action, and the Veterans Administration. Its ambition is to "cut red tape and act as a broker between the government and the private sector when a local community identifies a needed federal facility or resource and wants to mount a food or shelter project."¹⁶ The task force is currently assisting 19 communities in establishing projects to aid the homeless.

What are American Red Cross Chapters doing regarding the homeless?

The American Red Cross has 670 chapters providing both direct and indirect services to the homeless. A January and February 1986 national headquarters survey of local chapters surveyed the following:

- What type(s) of direct services is (are) provided to what type(s) of client.
- How many chapters provide indirect services to the homeless.
- How the chapters support these programmes financially.
- How the homeless programme has been received by all elements of the local community.
- How involved the board, the volunteers, and the paid staff are in implementing these programmes.
- What types of problems have been encountered with the programmes.
- How the chapter's public image has been affected by the homeless programme.
- What sort of help the chapters would like to receive from the national sector.

The survey findings were encouraging and provided the American Red Cross with the following overview:

¹⁶ *Op. cit.* p. 9.

- The direct services that the chapters provide are targeted at both the homeless and the individual or family who is in danger of becoming homeless.
- The major problem facing the chapters is the lack of a stable funding base that would allow them to plan for the type and extent of services that they can offer from one year to the next. This type of planning is most critical because the chapters believe that the homelessness problem is becoming more serious.
- Chapter involvement with the homeless has been well received by all segments of the community, including the chapter board and other agencies, as well as by the volunteer and paid staff.
- To more completely meet the needs of the homeless, chapters indicate that they need more money and more volunteers and paid staff. In addition, current information regarding all aspects of the homelessness problem is very important to the chapters, and many of them perceive the national sector as being in a good position to provide this information.

Red Cross people are involved in networking and planning with the private, voluntary and public sectors to address a problem that is overwhelming in many respects. It is also clearly evident that the chapters are greatly involved in keeping people from becoming homeless by enabling them to remain in their present housing or assisting them in obtaining a permanent residence.

Conclusion

The American Red Cross has accepted its moral obligation to meet the needs of the homeless and hungry by developing diverse programmes which respond to the specific affected population in local communities.

The challenge for the American Red Cross is to recognize and address local homeless and hunger issues while simultaneously meeting our commitment to the struggle for the eradication of homelessness and hunger worldwide. To date, we believe we are meeting the challenge.¹⁷

¹⁷ The American Red Cross publications entitled *Recognizing the Needs of the Homeless* (1986) and *Recognizing the Needs of the Homeless and Hungry* (1987) are available upon request.