

Piecing Community Together Homeless Population Groups

Children

Growing up in poverty is one of the greatest threats to healthy child development. Poverty and financial stress can impede children's cognitive development and their ability to learn. It can contribute to behavioral, social and emotional problems and poor health. ¹

Research on housing instability shows that children who do not have a stable place to call home face disruption in instruction and curriculum, have difficulty finding a quiet place to study or do homework, and can face disruption caused by parents' and children's stress and anxiety related to moving.

- In 2013 and 2014, more than one in five (22 percent) Oregon children lived in poverty. This equates to 182,000 children. ²
- From the 2014 Yamhill County Point In Time Count there were a total of 1217 homeless individuals counted. Of these there were 500 children equaling 45% of the total.

Chronically Homeless

Among people experiencing homelessness, there is a subset of individuals with disabling health and behavioral health conditions who experience homelessness for long periods and/or in repeated episodes over many years—people experiencing chronic homelessness.

The combination of challenges faced by individuals and families experiencing chronic homelessness includes complex health conditions, poor access to coordinated care services, prolonged time living on the streets, in shelters, and in and out of institutional settings, leads to worsening health conditions, premature mortality, and represents costs to the public that do not result in a decrease in homelessness.

Studies have found that people experiencing chronic homelessness cost the public between \$30,000 and \$50,000 per person per year through their repeated use of emergency rooms, hospitals, jails, psychiatric centers, detox and other crisis services – the use of which make little improvements to their health and well-being. Research from many communities has shown that permanent supportive housing is a cost-effective solution for chronic homelessness. The cost of the housing subsidy and supportive services is more than offset by less frequent use of costly public systems such as jails and emergency rooms. Given the cost it bears in human lives and public dollars, ending chronic homelessness is a moral and fiscal imperative. ³

¹ <http://datacenter.kidscount.org>

² Center for Housing Policy – Should I Stay or Should I Go?

³ <http://usich.gov/population/chronic>

Seniors

Studies across the U.S. have shown a clear upward trend in the proportion of 'older persons' (aged 50-64) among the homeless population. This is a group which frequently falls between the cracks of governmental safety nets. They are not old enough to qualify for Medicare, however, when their physical health is assaulted by poor nutrition and severe living conditions they may eventually resemble someone much older. Homeless persons between age 50 and 62 often have similar health care needs to housed persons 10-20 years older.

Studies show that older homeless adults have higher rates of geriatric syndromes, including problems performing daily activities, walking, vision and hearing, as well as falls and frailty when compared to the general populations.

Older homeless people are also more likely to suffer from cognitive impairments compared to younger homeless adults – older homeless are likely to suffer from impairments resulting from depression or dementia, which can contribute to the worsening of their physical health.⁴

Elderly chronically homeless people often require intensive service coordination. This helps them transition into permanent housing smoothly and ensures they remain there. Case management is often critical in coordinating care – primary health care, housing assistance, food, and other services can get lost without some assistance and supervision.⁵

Disabled/Medically Fragile/Mental Health Issues

On any given night, nearly 85,000 Americans with disabling health conditions who have been homeless for long periods of time – some for years or decades – can be found sleeping on our streets, in shelters, or other places not meant for human habitation. These men and women experiencing chronic homelessness commonly have a combination of mental health problems, substance use disorders, and medical conditions that worsen over time and too often lead to an early death.

Without connections to the right type of care, Americans with disabling health conditions who are homeless cycle in and out of hospital emergency departments and inpatient beds, detox programs, jails, prisons, and psychiatric institutions – all at high public expense. Some studies have found that leaving a person to remain chronically homeless costs taxpayers as much as \$30,000 to \$50,000 per year.

Supportive housing has been shown to help people permanent stay out of homelessness, improve health conditions, and, by reducing their use of crisis services, lower public costs. Numerous studies have shown that it is cheaper to provide people

⁴ National Coalition for the Homeless – <http://nationalhomeless.org/issues/elderly>

⁵ National Alliance to End Homelessness - <http://www.endhomelessness.org/>

experiencing chronic homelessness with supportive housing than to have them remain homeless.⁶

Veterans

The U.S. Department of Veterans Affairs (VA) states that the nation's homeless veterans are predominantly male, with roughly 8% being female. The majority are single; live in urban areas; and suffer from mental illness, alcohol and/or substance abuse, or co-occurring disorders. About 12% of the adult homeless population are veterans.

Homeless veterans are younger on average than the total veteran population. Approximately 9% are between the ages of 18 and 30, and 41% are between the ages of 31 and 50. Conversely, only 5% of all veterans are between the ages of 18 and 30, and less than 23% are between 31 and 50.

About 1.4 million other veterans, meanwhile, are considered at risk of homelessness due to poverty, lack of support networks, and dismal living conditions in overcrowded or substandard housing.

Although flawless counts are impossible to come by – the transient nature of homeless populations presents a major difficulty – the U.S. Department of Housing and Urban Development (HUD) estimates that 49,933 veterans are homeless on any given night.

In addition to the complex set of factors influencing all homelessness – extreme shortage of affordable housing, livable income and access to health care – a large number of displaced and at-risk veterans live with lingering effects of post-traumatic stress disorder (PTSD) and substance abuse, which are compounded by a lack of family and social support networks. Additionally, military occupations and training are not always transferable to the civilian workforce, placing some veterans at a disadvantage when competing for employment.

A top priority for homeless veterans is secure, safe, clean housing that offers a supportive environment free of drugs and alcohol.

Veterans need a coordinated effort that provides secure housing, nutritional meals, basic physical health care, substance abuse care and aftercare, mental health counseling, personal development and empowerment. Additionally, veterans need job assessment, training and placement assistance.⁷

- There are an estimated 8,000 military veterans in Yamhill County.
- From the 2014 Yamhill County Point In Time Count there were 36 homeless veteran families counted, a potentially low number likely missing individuals

⁶ United States Interagency Council on Homelessness - <http://usich.gov/>

⁷ National Coalition for Homeless Veterans – <http://nchv.org>

temporarily residing with friends or family, and those that did not want to be counted.

- From the Yamhill County Veterans' Stand Down in December 2014, there were 39 veterans and 4 family members in attendance.
 - Over two-thirds of attendees indicated they had a disability (29).
 - 25 attendees indicated that they were homeless, most for over 6 months.
 - Seven attendees were living outdoors or in vehicles, 12 were residing in temporary housing, and 22 were staying with friends or relatives, or had their own place. Of those 22, half were in danger of becoming homeless due to various factor.
 - Attendees indicated that their biggest needs were employment and housing but also came for benefits information, medical screenings, and military surplus items.

Doubled up/couch surfing

The number of poor people living doubled up, has grown substantially over the last several years. These are people who are housed, but not living independently in their own homes. This is a symptom of the affordable housing crisis in this country, as is homelessness. Doubling up for reasons of economic hardship is considered homeless by some Federal agencies but not by others.⁸

LGBT/higher rates

LGBTQ (Lesbian, Gay, Bisexual, Transgender, Queer) individuals face a particular set of challenges, both in becoming homeless, as well as, when they are trying to avoid homelessness. LGBTQ persons face social stigma, discrimination, and often rejection by their families, which adds to the physical and mental strains/challenges that all homelessness persons must struggle with. Frequently, homeless LGBTQ persons have great difficulty finding shelters that accept and respect them. LGBTQ individuals experiencing homelessness are often at a heightened risk of violence, abuse, and exploitation compared with their heterosexual peers. Transgender people are particularly at physical risk due to a lack of acceptance and are often turned away from shelters; in some cases signs have been posted barring their entrance. There are currently no federal programs specifically designed to meet the needs of gay and transgender homeless youth, and there are no protections in place to keep gay and transgender youth from being discriminated against while accessing federally funded homeless services.

- 40% of the homeless youth nationally identify as LGBTQ.
- 43% of homeless youth nationally served by drop-in centers identified as LGBTQ.
- Gay and transgender students are two-times less likely to finish high school or pursue a college education compared to the national average.

⁸ National Alliance to End Homelessness - <http://www.endhomelessness.org/library/entry/media-resource-trends-in-homelessness>

- According to one study, 26 percent of gay teens were kicked out of their homes when they came out to their parents.
- LGBT homeless youth commit suicide at higher rates (62%) than heterosexual homeless youth (29%).

**Statistics provided according to the [Williams Institute](#) study of national service providers. See [nationalhomeless.org](#), [thetaskforce.org](#),*

1 paycheck away

In the March 1, 2015 issue of the Oregonian, Anna Griffin writes, “In the U.S. today, 600,000 people are homeless and 7 million more are one missed paycheck or health crisis from sleeping on the streets.”

In Yamhill County:

- A minimum wage earner would need to work 72 hours a week to afford a 2 bedroom apartment.
- A family would need 1.8 full-time jobs at median renter wages to afford a 2 bedroom apartment at fair market rent.
- Our neighbors are struggling to pay rent. The average income needed to afford a 2-bedroom apartment is \$36,880 annually. The average annual income for such jobs as retail sales clerk, janitor, and home health aide is between \$22,000 and \$27,000.⁹

Generational poverty vs Situational poverty

Generational Poverty is defined as a family having been in poverty for at least two generations. It is important to understand the difference between Generational Poverty and Situational Poverty.

A person/family can experience Situational Poverty when their income and support is decreased due to a specific change – job loss, divorce, death, etc. While there can be a domino effect caused by this one significant change, families experiencing Situational Poverty tend to remain hopeful, knowing that this is a temporary setback. This typically is not so with generational poverty.

Most people think of poverty as lacking financial resources to meet basic living requirements. Families dealing with Generational Poverty are also challenged with educational poverty and parental poverty. The cumulative effect of these different forms of poverty sometimes creates the most damaging outcome of Generational Poverty – the constant presence of hopelessness. Hopelessness is the key factor in creating the cycle – one generation to the next. Without hope and the belief that life can be better, the motivation and energy needed to break the cycle is very low.

People caught in the cycle of generational poverty are focused on surviving. They are focused on the issue/challenge facing them today. It may be money for food, finding a

⁹ <http://oregonhousingalliance.org>

place to live, dealing with family member's issues, unresolved health issues, etc. This is a daily experience - each day presenting itself with another issue, another challenge. All of this is done under the cloak of urgency. The concept of planning typically doesn't exist. In part because planning is tied to the belief that the individual has sufficient control of their life.¹⁰

In order to address generational poverty, a holistic approach is needed. This holistic approach needs to include access to opportunities and resources including job training and placement programs, education and youth development programs, and parenting programs to assist in strengthening families.

The unnamed/captured

The Point-in-Time (PIT) count is a count of sheltered and unsheltered homeless persons on a single night in January. HUD requires that Continuums of Care conduct an annual count of homeless persons who are sheltered in emergency shelter, transitional housing, and Safe Havens on a single night. Continuums of Care also must conduct a count of unsheltered homeless persons every other year (odd numbered years). Each count is planned, coordinated, and carried out locally. As you can imagine, trying to count all homeless persons in a community on a single day in January comes with its challenges.

In a February 2015 article by Dr. Lorena Brownless, she states that, "In 2014 youth totaled 39% of all homeless people, the sad truth is that this number is far higher and many young people are not being counted and not being offered services. HUD or the Housing and Urban Development only counts a particular portion of the homeless youth population and many in danger youth such as those that pack into homes of friends "couch-surfing" do not count in their total. Youth that stay in motels or those that cannot prove their homelessness do not count either."

In addition to uncounted youth, in rural areas such as Yamhill County, Oregon, many homeless persons do not get counted in spite of best efforts from the count team due to various factors. Studies indicate that rural homelessness manifests itself differently from urban homelessness. Rural homeless individuals and families are more likely than urban homeless individuals and families to be doubled-up with friends or families, living in vehicles, or living in substandard housing and often times are not counted during the Point-in-Time homeless count process.

¹⁰ <http://www.urbanventures.org/facts-about-poverty/>